

# **APPLICATION FOR ADMISSION**

Kew Park Montessori Day School  
79 Hiawatha Road, Toronto, Ontario M4L 2X7  
416-694-6273

School Year \_\_\_\_\_ Casa \_\_\_\_\_ Elementary \_\_\_\_\_ Grade \_\_\_\_\_

Child's Name \_\_\_\_\_ Nickname (if used) \_\_\_\_\_

Birthdate \_\_\_\_\_ Male/Female \_\_\_\_\_  
                  day       month       year

Names/Ages of siblings \_\_\_\_\_  
siblings \_\_\_\_\_

Parent's Full Name \_\_\_\_\_ Occupation \_\_\_\_\_

Parent's Full Name \_\_\_\_\_ Occupation \_\_\_\_\_

Address \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone (home) \_\_\_\_\_

(work-mother) \_\_\_\_\_ (work-father) \_\_\_\_\_

How did you hear about our school? \_\_\_\_\_

What is your experience with Montessori education?  
\_\_\_\_\_  
\_\_\_\_\_

Why did you choose our school? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What educational goals do you have for your child?  
\_\_\_\_\_  
\_\_\_\_\_

Specify any special educational, physical or emotional needs of your child. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby apply for the admission of \_\_\_\_\_ to Kew Park Montessori Day School.

Signature of Parent \_\_\_\_\_ Date \_\_\_\_\_

\*An application of \$100.00 must accompany this application. It is not refundable. It is a one-time per family fee and does not apply to re-enrollments, new admission of siblings, or admission to the elementary programme from our casa programme.

\*A copy of child's birth certificate must also accompany this application.