The Admission Process

Parent Visit and Observation
Parents are expected to tour the school, observe a classroom in session, and meet with the Head of School. This allows prospective parents and the School Head to become acquainted with each other and to share pertinent information ensuring a good match between the family and the school.

Application and supporting documents
Parents should submit a completed application form and a $75 non-refundable application fee after the classroom observation. Parents of children currently enrolled in another school must request that copies of records and Teacher Letters of Recommendation be submitted from that school (forms are available on the MCC website.)

Admission visit
Admission visit appointments will be arranged once all the application materials have been received. Children will explore the Montessori classroom materials with the guidance of a Montessori teacher. All children will be informally assessed by a Montessori teacher to determine readiness and/or “right fit” for the program.

Admission Decision
All decisions will be mailed by the school. For “current” school year decisions, letters will be mailed within the week. For “upcoming” school year decisions, letters will be mailed in late February or thereafter on a rolling basis. All agreements, contracts, and deposits must be received within two weeks from the date of issuance. Students are considered to be enrolled once all contracts, deposits, and required records are received.

Enrollment contract
Once enrolled, annual tuition payments should be made in 10 monthly installments as stated in the enrollment contract. Guidelines of all school policies are outlined in the The Montessori Children’s Community Parent/Student Handbook, which will be provided to families before the beginning of each new school year.
Application for Admission to
Montessori Children’s Community
or
Sewickley Montessori Middle School

Child’s Name: ____________________________ Date of Birth: ____________________________

Terri Modic, School Head
474 Chadwick Street, Sewickley, PA 15143
Office: 412-741-8982
www.montessorichildrenscommunity.org
montessorichildrenscommunity@comcast.net

Home address: ____________________________________________
______________________________________________________

School District: ____________________________

APPLICATION FOR:

CHILDREN’S HOUSE AM (8:30 to 11:30 a.m.)

CHILDREN’S HOUSE AM EXTENDED DAY (Tues/Wed/Thurs until 3:30 p.m.)

CHILDREN’S HOUSE ALL DAY EXTENDED DAY

CHILDREN’S HOUSE ALL DAY

LOWER ELEMENTARY GRADE: ____________________________

UPPER ELEMENTARY GRADE: ____________________________

MIDDLE SCHOOL GRADE: ____________________________

Office Use:

Please place a current photo of your child here.

Date application received:

Application fee Check #:

Admission visit:

Teacher recommendation:

Copies of records:

Decision:

Official records received:

Age of child as of 9/1:

Deposit:
Family Information

Parent Name: ______________________________ Email address___________________________

Mailing Address: ________________________________________________________________

__________________________________________________________

Home Phone: _____________________________Cell Phone: _____________________________

Employer: _________________________________________________________________

Business Address: ________________________________

__________________________________________________________

Work Phone: ____________________________________________________________

Parent Name: ______________________________ Email address___________________________

Mailing Address: ________________________________________________________________

__________________________________________________________

Home Phone: _____________________________Cell Phone: _____________________________

Employer: _________________________________________________________________

Business Address: ________________________________

__________________________________________________________

Work Phone: ____________________________________________________________

Parents/Guardians are: _______married________divorced_______other

Applicant lives with: ____parents___custodial parents____mother ___father____other

Admission correspondence should be addressed to:__________________________________

School decision responsibility will be assumed by:____________________________________

Financial responsibility will be assumed by:_________________________________________

Other Children in the family:

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<th>NAME</th>
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APPLICANT INFORMATION

What are the most important qualities you are looking for in a school?:

What aspects of the Montessori philosophy and methodology are most appealing to you and why? Why are you specifically interested in Montessori Children's Community?

Please list 5 adjectives that describe your child:
1.
2.
3.
4.
5.

Give a brief description of qualities you would like to see in your child at age 22.

Describe what you see as success for your child. What expectations or goals do you have for your child in sending him/her to Montessori Children's Community?

Please list activities that you and your child/family enjoy (walks, books, sports, etc.):

What is your child's Primary spoken language?:
Please list any additional languages spoken in your home or by your child:
Do you have any concerns about your child (i.e., developmental, hearing, vision, behavioral, separation, social, academic)?
How did your family learn about Montessori Children’s Community?

Does your family or child know anyone who attends MCC? If so, who?

Has the applicant applied to MCC previously? If so, when?

Is the applicant applying to other schools? If so, where?

Parent Education is a very important piece of your child’s Montessori experience. Are you willing to participate on a continuing basis?

Please add any additional information about your child or family that will be relevant to us to help us get to know the applicant.

______________________________________________________________________

I hereby apply for admission of my child,______________________________, to Montessori Children’s Community for the 20___ - 20___ academic school year. Enclosed is my application fee for $75.00, check #____.

Parent/Guardian Signature___________________________________________Date_________

Parent/Guardian Signature___________________________________________Date_________

Thank you for taking the time to fill out this application completely. The information contained within the application will be kept confidential. Montessori Children’s Community seeks to maintain a student body consisting of children who will flourish in a peaceful environment and add to the positive spirit of the community. Once a child is accepted and enrolled at Montessori Children’s Community, we are committed to his/her emotional, physical, social, and cognitive growth through 8th grade. Our curriculum is continuous from the Children’s House through 8th grade and builds on the skills and knowledge acquired in each previous
level. We believe that a child maximizes his/her potential by completing our programs through the 8th grade.

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Montessori Children’s Community admits students of any race, color, national, and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national, or ethnic origin, in administration of its policies, admissions policies, and other school-administered programs or otherwise discriminate in violation of federal, state, or local law.

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Please mail or drop off your application and $75.00 application fee to:

Montessori Children’s Community
474 Chadwick Street
Sewickley, PA 15143
412-741-8982
www.montessorichildrenscommunity.org