



# Creative World Montessori School

Phone: (708) 354-5255  
Email: info@cwm.school

## For Office Use

Date Received	_____
Fees Paid: Tuio	<input type="checkbox"/> Check <input type="checkbox"/> # _____
Program/Session	_____
Family Name	_____
Child's Birth Date	_____
Phone Number	_____
Special Notes	_____
Date of Tour	_____
Interview	_____
Teacher	Date

## Application For Admission

**Application Fee:** A \$150.00 application fee per family is required with this application. At your request we will hold your fee and application on file for next year.

### Application Fee Payment Method (please select one):

I would like an **online invoice** to be set up to pay the application fee.

I would like to **pay by check** (make payable to **CWMS**).

This application is submitted for admission of \_\_\_\_\_ (child's name)  
to Creative World Montessori School, with an intended start date of \_\_\_\_\_.

Program being applied for:

**All-Day Primary 3-6 Class** (3–6-year-olds, including Kindergarten) 5 days/week, 7 hr. min.  
Hours needed: \_\_\_\_\_ am to \_\_\_\_\_ pm (Available 7am to 6pm)

**Half-Day Primary 3-6 Class** (3–6-year-olds, including Kindergarten) 5 days/week  
Desired Schedule: AM Class \_\_\_\_\_ (8:30-11:30am) OR  
Extended-AM \_\_\_\_\_ (8:30-12:30pm) OR AM + PM \_\_\_\_\_ (8:30-3:30pm)

**All-Day Toddler** (2 years old by Sept. 1<sup>st</sup>) 5 days/week, 7 hr min.  
Hours needed: \_\_\_\_\_ am to \_\_\_\_\_ pm (Available 7am to 6pm)

**CORE Toddler** (2 years old by Sept. 1<sup>st</sup>) (8:30-12:30 PM)  
Desired Schedule: 2 days: \_\_\_\_\_ 3 days: \_\_\_\_\_ 4 days: \_\_\_\_\_ 5 days: \_\_\_\_\_  
\*Attendance days must be consecutive for 2-, 3-, and 4-day schedules.\*

**Young Toddler** (13 months by Sept. 1<sup>st</sup>) 5 days/week, 7 hr min.  
Hours needed: \_\_\_\_\_ am to \_\_\_\_\_ pm (Available 7am to 6pm)

**Nido** (6 months by Sept. 1<sup>st</sup>) 5 days/week, 8 hr min.  
Hours needed: \_\_\_\_\_ am to \_\_\_\_\_ pm (Available 7am to 6pm)

Child's Full Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_ Nickname \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Primary Phone Number \_\_\_\_\_ Primary Email \_\_\_\_\_

**Parent/Guardian Information:** Parent/Guardian 1 Name: \_\_\_\_\_

Best Phone # \_\_\_\_\_ Email \_\_\_\_\_

Employer \_\_\_\_\_ Work Phone # \_\_\_\_\_

Parent/Guardian 2 Name: \_\_\_\_\_

Best Phone # \_\_\_\_\_ Email \_\_\_\_\_

Employer \_\_\_\_\_ Work Phone # \_\_\_\_\_

Marital Status \_\_\_\_\_ If divorced/ separated, with whom does the child reside primarily? \_\_\_\_\_

**Child Background Information:** Has your child previously attended school or child care?  Yes  No

If yes, where and when? \_\_\_\_\_

Does your child have any physical, emotional, or developmental concerns?  Yes  No

If yes, please explain: \_\_\_\_\_

Does your child receive any ongoing treatment or medications?  Yes  No

Allergies (if any): \_\_\_\_\_

Does your child nap? \_\_\_\_\_ If yes, when? \_\_\_\_\_

**Family Information:** Names and ages of siblings \_\_\_\_\_

Do you have a child attending CWMS?  Yes  No If yes, will this child be returning next year?  Yes  No

Have any siblings graduated from Creative World Montessori School?  Yes  No

**Additional Information :** How did you first learn about CWMS? \_\_\_\_\_

Have you ever observed a Montessori classroom?  Yes  No

### Admissions Policies & Program Information

Applicants must meet age and developmental readiness requirements for their intended program in accordance with Montessori guidelines and state and federal licensing regulations. Exceptions may be considered only if space allows, and the child demonstrates readiness for the program. **All 3-year-olds entering the Primary 3-6 class must be potty-trained.**

Applications are processed on a **first-come, first-served basis**. Priority is given to **siblings of current students and alumni**. Classroom placement also considers age, gender, and prior Montessori experience.

Primary Program Commitment (3-6): I understand that the **Primary (3-6) program is designed as a three-year Montessori cycle**, with the Kindergarten year serving as the culmination of learning and development. Continued enrollment through the Kindergarten year is strongly encouraged for the child's success.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Next Steps: Submission of this Application for Admission and registration fee places your child on the admissions list. Families will be contacted for classroom visits in March and April. Upon acceptance, an Advanced Tuition Deposit is required and applied toward annual tuition. A six-week trial period follows admission, during which either the school or the family may determine that the placement is not a good fit.**