

# Highlawn Montessori School

## Children's House Enrollment Application



### CHILD

Name \_\_\_\_\_ Gender \_\_\_\_\_ Date of Birth \_\_\_\_\_

My child will be eligible for enrollment in fall 20\_\_\_\_

Previous School Experiences (name of school, type of school, how long attended).

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### PARENTS

**Mother**

**Father**

Name \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

City, State, Zip \_\_\_\_\_

\_\_\_\_\_

Home phone \_\_\_\_\_

\_\_\_\_\_

Other phone \_\_\_\_\_

\_\_\_\_\_

Email \_\_\_\_\_

\_\_\_\_\_

### SIBLINGS

Name

Date of Birth

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### OTHER

How did you hear about Highlawn? \_\_\_\_\_

Have you had a child at Highlawn previously? \_\_\_\_\_ When? \_\_\_\_\_ Teacher? \_\_\_\_\_

Are you an alumna/us of Highlawn Montessori School? List years attended. \_\_\_\_\_

Will your child need After School care? \_\_\_\_\_ Number of days? \_\_\_\_\_

After finishing kindergarten at Highlawn, where do you plan to send your child for elementary school?

- |   |   |
|---|---|
| <input type="checkbox"/> Highlawn Montessori Elementary | <input type="checkbox"/> Another Private School |
| <input type="checkbox"/> Public School                  | <input type="checkbox"/> Undecided              |
| <input type="checkbox"/> Parochial School               | <input type="checkbox"/> Other                  |

### ADMISSION PROCEDURES

Please contact the school to set up an appointment to tour the school. In order to consider placement for your child, this Application for Enrollment must be signed and returned to the Highlawn office with a non-refundable fee of \$35. Students are added to waiting list when the application and fee are received in the office. Send to: Admissions, Highlawn Montessori, 3531 Somerset Drive, Prairie Village, KS, 66208.

<b>Office Use Only</b>	
Date received	_____
Date of Tour	_____
\$35 fee paid	_____
<small>Rev. 5/08</small>	

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

Date \_\_\_\_\_