



**APPLICATION FOR ADMISSION**

\_\_\_\_\_

Last name of student                      First                      Middle                      Nickname

Home Telephone \_\_\_\_\_ Girl \_\_\_\_\_ Boy \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Applying for:      Half day                      Full Day                      PM After School Care needed

\_\_\_\_\_

Father's Last Name                      First                      MI

\_\_\_\_\_

Mother's Last Name                      First                      MI

\_\_\_\_\_

Occupation                      Employer

\_\_\_\_\_

Occupation                      Employer

\_\_\_\_\_

Cell Phone                      Work Phone

\_\_\_\_\_

Cell Phone                      Work Phone

E-mail address: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Previous School experience:

_____	_____
Name of school	Duration

How did you hear about Villa Montessori School?

Personal Reference \_\_\_\_\_ Bay Area Parent \_\_\_\_\_ Website \_\_\_\_\_ Other \_\_\_\_\_

**A registration fee of \$100 must accompany this application and is non-refundable and is not applied to tuition.**

**Please be sure to notify Villa of any changes to your address or phone number. Thank You.**

*Office use Only*

- Date application Received* \_\_\_\_\_
- Registration Fee received* \_\_\_\_\_ (Check#)
- Application processed*

- Observation date* \_\_\_\_\_
- Interview date* \_\_\_\_\_