FOOTHILLS MONTESSORI SCHOOL

			Applicat	ion for	Enrollment -	– 202	3 /	2024 S	chool Year
Child's Name			Date of Birth			Boy	Girl		
						_		Age	Age
Parent /				Parent / Guardian					
	Guardian								
Employer					Employer				
Cell Phone					Cell Phor	ne			
Home Street Address									
City				State		Zip Cod			
Home Phone				Other		e-ma	ail		
						Addre	ess		
Previous					Current				
School					Grade Level				
Did you take a tour of the FMS campus?									
Are you interested in Spanish Immersion?									
How did you hear about FMS?									
			Prog	gram Re	quested				
Half Day Preschool		Full Day	Full Day		Full Day Elementary				
AM PM		Preschool	Kindergar	ten	•			Extended Care	
AM P	IVI				or				
				F	ull Day Middle	Schoo	ı		
Semester Requested		Fall			Spring			Sı	ummer
A \$125 application fee is required at time of assessment and can be paid by check or with credit card.									
Please enclose a copy of your child's birth certificate, all previous school records including immunization records and report cards, the completed parent questionnaire, and a small photograph. A letter of recommendation is also required for all kindergarten, elementary, and									

middle school applicants from the child's most recent teacher or school administrator. Applications will not be processed without these items.

I have read and understand the tuition, withdrawal and behavior policies included with our current brochure. Upon enrollment, I shall agree to these policies.

Signature_	 	
Date		