



GRACE MONTESSORI SCHOOL Admission Procedures

Thank you for your interest in applying for admission of your child to Grace Montessori School. Our admission process serves several important purposes. It allows you, the parent, to become better acquainted with our mission and practices. Likewise, it provides us with the opportunity to learn about your expectations and goals for your child's education. It also gives families who are new to Montessori an excellent introduction to the philosophy and methods of Montessori education in general.

1. **TOUR** – A tour will give you an opportunity to observe our classrooms, see our facility and have questions answered about our program. Tours are scheduled by appointment through the Admission Office. As a helpful reference, please review the school literature prior to your visit. Tours are required and are for parents only (or those in loco parentis), and we request that you leave your child at home.
2. **APPLICATION** – A completed Application for Admission and a non-refundable \$75.00 application fee are required for each family seeking student admission after you have toured the school. Applications are accepted throughout the year; however, for optimum consideration for the upcoming school year, please submit your child's application no later than March 1.
3. **TRANSCRIPT/TEACHER RECOMMENDATION** - If applicable, please sign the Authorization for Release of Information Request form. Any past and/or current academic records/test scores are required for admission consideration. This information is necessary to make your child's application complete.
4. **STUDENT INTERVIEW** – Upon receipt of your completed application, the Admissions Office will schedule an interview (intake) for your child with one of our teachers. Students are required to be fully toilet-trained and will be assessed primarily in the areas of academic skills, independence, concentration, language skills, physical development, behavior, and readiness for our program. The interview familiarizes the child with the school and establishes a mutual understanding of Montessori education between the family and school.
5. **ADMISSION DECISIONS** – You will be notified of the admission decision within a week, unless awaiting transcript or other requested documentation. Enrollment contracts are offered on a space-available basis.

Admission Policy

Admission decisions are based upon the space available and an evaluation of the suitability of GMS for each student. Generally, priority consideration for enrollment is given to applicants in the following order: (1) qualified siblings of current GMS students; (2) qualified students with previous Montessori experience; (3) all other qualified applicants. GMS seeks to create an optimal developmental environment for all students. The creation of peer groupings is very important; therefore, great care is taken to maintain a balance by gender, age and learning differences and styles in each classroom.

Grace Montessori School admits students of any race, color, gender, creed or national 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, gender, creed or national origin in employment or in its administration of its education policies, admission policies, financial aid programs, athletics or other school-administered programs.

814 W. Linden St. Allentown PA 18101 610-435-4060

PARENT/GUARDIAN INFORMATION

Parent/Guardian 1 (please complete)

Mr. Mrs. Ms. Dr. Other _____

Last Name First Name Middle Name

Address (if different from child's) _____

City State Zip

Employer _____ Work Phone _____

Email _____ Home Phone _____ Cell Phone _____

Parent/Guardian 2 (please complete)

Mr. Mrs. Ms. Dr. Other _____

Last Name First Name Middle Name

Address (if different from child's) _____

City State Zip

Employer _____ Work Phone _____

Email _____ Home Phone _____ Cell Phone _____

Parents/Guardians are: Married Separated Divorced Single Widowed Deceased

Student resides with: Both Parents Mother Father Guardian(s)

Other adults (i.e. stepparents, grandparents) with whom the child lives:

Name _____ Relationship _____

Name _____ Relationship _____

A copy of any legal arrangements concerning the student should be submitted with this application. GMS will distribute all pertinent documents (i.e., progress reports, financial statements, etc.) to all legal guardians (as specified on this application) unless legal documentation specifies otherwise.

Financial Responsibility

A limited number of scholarships for qualified applicants are awarded for each school year. Please check here for information. Financial responsibility for the student's tuition will be assumed by (please provide name and address if not parent/guardian):

Please list any pertinent medical facts (such as allergies, potential communicable diseases, physical impairments, treatment for emotional concerns or special disabilities), and information involving adoption, divorce, or family relocation.

[For Office Use Only] Date Application & Fee Rec'd _____

Student Visit Date _____ Faculty _____

Date accepted _____

Date contract sent _____ Start date _____

Placement _____



**GRACE MONTESSORI SCHOOL
PARENT QUESTIONNAIRE**

Our foremost goal in the admissions process is to find the right fit between student, family and school. Please answer the following questions to help Grace Montessori School gain a better sense of: your child as a unique individual; your expectations for your child's education; and the values around which you have built your family.

1. How did you learn about GMS? _____
2. Through what grade do you plan to have your child attend GMS? Kindergarten Grade 1, 2, 3, 4, 5
3. Do you have any knowledge of Montessori education, and if so, from what sources?

4. How would you describe your child's personality?

5. Has your child had experience being away from you? (Briefly discuss separation.)

6. Describe your child's previous school experience, if any. Has your child previously attended a Montessori school?
If yes, how long?

7. Is your child involved in any activities outside of school?

8. How do you discipline your child?

9. Does your child have any learning, behavioral or developmental needs that you are aware of, or that have been diagnosed by a professional? (*This mandatory information is needed in order to assess proper placement of your child.*) Please check any/all that apply.
 - ADD/ADHD
 - Asperger Syndrome/Autism
 - Auditory or visual processing
 - Dysgraphia
 - Dyslexia
 - Oppositional defiance
 - Other _____

**Thank you for your cooperation and your interest in Grace Montessori School.
814 W. Linden St. Allentown PA 18101 610-435-4060**



Authorization for Release of Information

Parents please complete the **front** of this form.

Parent Waiver:

In order to allow the applicant to be considered for admission to the Grace Montessori School, I/we authorize the release of my/our child's records as requested by the Grace Montessori School. I/we release every person and institution from all liability resulting from or pertaining to the furnishing of records, documents, and other information provided to the Grace Montessori School for that purpose. I/we will not seek access to confidential recommendation and evaluation materials before and/or after the admission decision is made.

Parent/Guardian Signature: _____ Date: _____

School Reference Form:

To The Principal of Current School:

_____ has applied for admission to Grace Montessori School.

Please forward:

- Progress Report/Transcript of Academic Record
- Health and Immunization records
- Psychological Reports or Professional Evaluations
- Questionnaire on the reverse of this form

Please feel free to add anything that will be useful in considering this applicant. The information you give us will be held in confidence. We appreciate your returning this form and the student's records to the address below by _____. Thank you for your assistance.

Grace Montessori School
814 W. Linden Street
Allentown, PA 18101
Phone: (610)435-4060; Fax: (610)351-6276

(For school or day care to complete)

Student's Name _____

Present Level/Grade _____

1. Does the student have intellectual interests?

2. Does this student cooperate with authority? Yes No With fellow students? Yes No

3. Are there any behavior problems? If so, please explain.

4. Does the student have special interests?

Parent relations with the school

Indifferent

Often Critical

Sometimes Overly Concerned

Generally Cooperative

Enthusiastic and Supportive

Do the parents cooperate with the school calendar? Yes No

Do they take extended holidays? Yes No

Do they take an excessive number of holidays? Yes No

Do they volunteer at school events, activities, etc? Yes No

Parent Relations with the child

Evidence of pressure, disharmony or indifference? If so, please explain

Parents are supportive and harmonious

Date: _____

Signed _____

Position: _____

School: _____