



# Shrewsbury Montessori School

Growing Bright Minds from Age Three through Grade Six

## 2020-2021 APPLICATION FOR ELEMENTARY ADMISSION

Student's Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_ Best Number to Call: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Email Address: \_\_\_\_\_

Parent/Guardian 1: \_\_\_\_\_ Occupation: \_\_\_\_\_

Parent/Guardian 2: \_\_\_\_\_ Occupation: \_\_\_\_\_

Sibling names: \_\_\_\_\_ Ages: \_\_\_\_\_

### Shrewsbury Campus

- Lower Elementary
- 1<sup>st</sup> Year
- 2<sup>nd</sup> Year
- 3<sup>rd</sup> Year
- Upper Elementary
- 4<sup>th</sup> Year
- 5<sup>th</sup> Year
- 6<sup>th</sup> Year

**If you prefer to type your answers, please attach your answers to your application.**

Current school or program: \_\_\_\_\_

Why are you interested in SMS for your child? \_\_\_\_\_

Has your child attended a Montessori School? If so, where?  
\_\_\_\_\_

What attracts you to the Montessori Method? \_\_\_\_\_

What other schools you are applying to? \_\_\_\_\_

Tell us about your child. (Interests, strengths, challenges, etc.) \_\_\_\_\_

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

I have read and understand the application and enrollment procedures at Shrewsbury Montessori School.

Parent/Guardian 1 Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent/Guardian 2 Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

*Shrewsbury Montessori School admits students without regard to race, color, religious affiliation, national origin, ethnicity, sex, or any other characteristic protected by federal, state and local law; including all privileges, programs, and activities generally accorded or made available to students at the school. Shrewsbury Montessori School does not discriminate in violation of any law or statute in the administration of its educational policies, admissions policies, financial program, or school-administered programs.*

### Office use Only

Tour Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Follow-up \_\_\_\_/\_\_\_\_/\_\_\_\_ Application and \$40.00 Fee \_\_\_\_/\_\_\_\_/\_\_\_\_ Accepted by: \_\_\_\_\_

Notes:



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Please answer the following questions.

Please describe your child's current school setting and experience.

Describe your child's learning style. Are there any concerns we should know about your child, including developmental, medical, physical, emotional, educational, or behavioral?

What are the three things you most value about a Montessori education? How would the Montessori philosophy benefit your child?