



Shrewsbury Montessori School

Growing Bright Minds from Age Three through Grade Six

2021-2022 APPLICATION FOR CHILDREN'S HOUSE 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 | AUBURN CAMPUS |
|---|---|
| <input type="checkbox"/> Five Mornings (Ages 18 months–3 years Only) | <input type="checkbox"/> Three Mornings (Ages 2.9–4) <input type="checkbox"/> Five Mornings (Ages 2.9–4) |
| <input type="checkbox"/> Five Full Days (Ages 18 months–Kindergarten) | <input type="checkbox"/> Three Full Days (Ages 2.9–4) <input type="checkbox"/> Five Full Days (Ages 3–Kindergarten) |

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.



Submit the \$40.00 Application Fee with PayPal or Credit Card by scanning the QR Code
OR by mailing a check to: Shrewsbury Montessori School ATTN: Admissions
55 Oak Street, Shrewsbury, MA 01545

Office Use Only: ___/___/___ Application Received ___/___/___ Fee Received

Program Applying For: _____