

Christian Montessori Academy

Application for Admission

3702 S 90th E. Ave.
Tulsa, OK 74145
918-628-6524

Children are evaluated on the basis of readiness for school and potential for success in a Montessori classroom. It is equally important to determine whether the parents' educational philosophy is compatible with that of CMA. The admissions process consists of a parent observation visit, submission of a completed application form and non-refundable registration fee.

A parent, child, and teacher meeting may also be required prior to admittance. Older children may be asked to spend time in the classroom prior to acceptance for admission.

CMA is a private, non-denominational school which teaches using proven Montessori methodology, including Dr. Montessori's religious curriculum. It is important for all enrolled families to uphold our tradition of excellence in embracing the spiritual and educational growth of each child.

CMA welcomes all qualified individuals regardless of sex, race, color, creed, disability, national or ethnic origin.

Child's Full Name: _____ Nickname: _____

Birthdate: _____ Gender: M F

Mother's Name: _____ Father's Name: _____

Parental Status: Married Divorced Separated Never Married

If divorced, who maintains custodial rights: Mother Father Joint

Child's Residing Address: _____

City: _____ ST: _____ Zip: _____

Child lives with: ___ Mother ___ Father ___ Other: _____

Alternate Address: _____

City: _____ ST: _____ Zip: _____

Mother's Home Phone: _____ Work Phone: _____ Cell: _____

Father's Home Phone: _____ Work Phone: _____ Cell: _____

Primary Language spoken in the home: _____ Secondary: _____

Siblings of Enrolling Child:

Name: _____ Age: _____ M F

Name: _____ Age: _____ M F

Name: _____ Age: _____ M F

Mother's Employer: _____

Address: _____

Father's Employer: _____

Address: _____

Mother's e-mail: _____ Father's e-mail: _____

Previous schools attended by Enrolling Child (include day care facilities)

Name: _____ Dates: _____

Name: _____ Dates: _____

Name: _____ Dates: _____

Please help us get to know your child by completing the following information:

What is your experience with Montessori education? _____

What educational goals do you have for your child? _____

How would you describe your child's personality? _____

How would you describe your child's learning style? _____

What do you consider to be your child's strengths? _____

What do you consider to be your child's weakness? _____

How does your family enjoy spending time together? _____

How do you discipline your child? _____

Does your child have any special needs – emotionally, physically, or medically that we need to be aware of?

Does your child have allergies of any kind? Yes No If yes, please describe:

Have these allergies or special needs been medically diagnosed by a physician or pediatrician? Yes No

What is the name of your child's primary care physician? _____

Address: _____ Phone: _____

Are you committed to promoting and supporting Christian Montessori Academy and its educational doctrine?
Yes No

In what ways will your support of CMA best fit your lifestyle? (please circle)

Monetary

Advertising/Promotion

Construction

Classroom

Events

Fundraising

Clerical/Office

Musical

Other: _____

CMA is a non-profit, 501(c)(3) corporation. Tuition payments alone do not cover the total operating expenses incurred over the course of each school year. CMA relies on fundraisers, generous donations and community support in order to operate. Occasionally, shortfalls occur and the need for additional funding may arise. Can we count on your support during these times? Yes No

Please feel free to make any additional comments you feel would be helpful in reviewing your application for acceptance into CMA:

Thank you.

A non-refundable fee of \$200.00 per child is required to secure a placement in CMA. This fee is not applied to tuition or account balances of any kind.

I hereby apply for the admission of my child to Christian Montessori Academy for the school year 2008-2009, and agree to abide by the rules and regulations thereof.

Signature of Parent or Guardian

Date

OFFICE USE ONLY:

Application received by: _____

Date: _____

Letter of Acceptance Sent: Yes No

Date: _____

Initials: _____

Program: Preschool

Elementary I

Elementary II

Start Date: _____

Letter of Non-Acceptance Sent: Yes No

Date: _____

Initials: _____

Reason for Non-Acceptance:

Director of Education

Date: