



application for admission Primary (ages 3 to 6) • Elementary (ages 6 to 12)

Child's name _____ Preferred name _____ Sex M F

Home address _____

Home phone (____) _____ Street Apt. City State Zip Date of Birth (mm/dd/yy) _____ Nationality _____

Schools/programs attended (most recent first)	Address	Dates attended

Parent/Guardian I Full name _____ Relationship to child _____

Home address (if different) _____

Work phone _____ Home phone _____ Cell phone _____ Email _____

Education _____

Occupation _____ Title _____

Name and address of employer _____

Community interests and activities _____

Parent/Guardian II Full name _____ Relationship to child _____

Home address (if different) _____

Work phone _____ Home phone _____ Cell phone _____ Email _____

Education _____

Occupation _____ Title _____

Name and address of employer _____

Community interests and activities _____

Child resides with _____

Siblings

Birthdate

Current School

Grade

Relatives or friends who have attended Metropolitan Montessori School or St. Michael's Montessori School

An **application fee of \$40** should accompany this form. An optional photo of your child may be included.

Parent signature

Date

Parent Signature

Date

Completed applications should be returned to Metropolitan Montessori School, 325 West 85th Street, New York, NY, 10024. All Elementary applications must include test results administered by the Education Records Bureau (220 E. 42nd St., New York, NY, 10017; 212-672-9800). Please request that a copy be mailed to the Admissions Office.

Financial Aid

If you wish to apply for financial aid, you must also submit the Parents Financial Statement (PFS) to the School & Student Service for Financial Aid (SSS). This form is available in the MMS Admissions Office, and on the MMS website, www.mmsny.org.

Parent questionnaire (You may attach a separate page to answer these questions.)

How did you become interested in our school?

What activities does your child enjoy most alone and with your family? What is a typical day for your child?

Tell us about your child's personality, current interests, strengths and challenges. How does your child interact with peers and family members (is he or she going, gregarious, shy, reserved, cooperative)?

Beside parents, what other people (siblings, grandparents, caregivers, etc.) play a significant role in your child's life? Describe the relationships.

Please describe your child's general health, including allergies, and early developmental history.