



Woodland Montessori School

5 Park Hill Rd.
Kalispell, MT 59901
Ph: 755-3824
Fax: 755-7234

E-mail: woodland@mtmontessori.com

Pre-Admission Application

Application is hereby made for admission inquiry of my child as a student at Woodland Montessori School, Inc., for the academic year of 20_____. I understand that this form carries no financial obligation and does not guarantee my child(s) placement and only communicates interest in enrollment.

Child's Full Name _____ Child's Birth Date _____ M F Toilet Independent: No Yes

Child's Full Name _____ Child's Birth Date _____ M F Toilet independent: No Yes

My child has received and is current on the state-recommended immunizations for his or her age? No Yes

Has the child attended any previous childcare/school? No Yes If yes, please list name of child care/school and duration attended:

Please disclose any physical, mental, or emotional disabilities of the child or any other matter that could affect the child's enrollment and/or participation at the school: _____

How did you hear about Woodland Montessori School? Referral Internet Drive-By Alumni Sibling Attending/Attended

Father/Guardian	
Father/Guardian Name	
Phone Number:	
Address:	
Email:	
Business Name & Number:	
Preferred Contact Method:	

Mother/Guardian	
Mother/Guardian Name	
Phone Number:	
Address:	
Email:	
Business Name & Number:	
Preferred Contact Method:	

Woodland Montessori Programs (Please indicate anticipated schedule)

CHILD(S) NAME: _____

HALF DAY 8:45-12:25

- Five days per week
 - Four days per week (Monday-Thursday)
 - *Three days per week (Monday-Wednesday)
- *(Introductory program for 2-3 year old's only)

CHILD(S) NAME: _____

SCHOOL DAY 8:45-3:00

- Five days per week
 - Four days per week (Monday-Thursday)
 - *Three days per week (Monday-Wednesday)
- *(Introductory program for 2-3 year old's only)

EXTENDED CARE

- Before-school care 7:30-8:45
- After-school care 3:00-5:30
- Before and After School Care 7:30-5:30

Please consider my child for the Montessori EARLY LEARNER program. **Children ages 24-48 months. Those younger than age 3 (36 months) as of September 10 of the school year must start here.**

Please consider my child for the Montessori EARLY CHILDHOOD program. **Children must be 3 years old and bathroom independent by September 10 of the school year.**

Please consider my child for the Montessori LEADERSHIP YEAR (Kindergarten). **Children will be in an Early Childhood Classroom and engage in special academic and extracurricular activities. Must be age five by September 10 of the school year and attend on an 8:45-3:00 Monday-Friday schedule.**