

**Please mail completed form to:**

Penfield Montessori Academy  
c/o Amy Bontempo  
1441 N. 24<sup>th</sup> Street  
Milwaukee, WI 53205  
-or-

amybontempo@penfieldmontessori.org



**PENFIELD**  
MONTESSORI ACADEMY

**Eligibility Requirements:**

- K3-** Child must turn 3 years old on or before September 1, 2020.
- K4-** Child must turn 4 years old on or before September 1, 2020.
- K5-** Child must turn 5 years old on or before September 1, 2020.

**Intent to Enroll Form**

**Please Note:**

1. One application is required for each child you enroll.
2. Complete all information on the form.
3. Please provide copies of the following: Child's current immunization record, copy of birth certificate and proof of residency.
4. If your child has been evaluated for special needs please provide us with a copy of: the Individual Education Plan (IEP), evaluations and/or other pertinent information.

**Student Information (Please print clearly)**

Child's First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Student's Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_

Gender: \_\_\_\_ Male \_\_\_\_ Female Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age as of September 1, 2020: \_\_\_\_\_

School previously attended: \_\_\_\_\_ City and State of school: \_\_\_\_\_

Program in which you are enrolling your child: \_\_\_\_K3 \_\_\_\_K4 \_\_\_\_K5 (No availability in 1<sup>st</sup>, 2<sup>nd</sup> or 3<sup>rd</sup> grade)

**Federal Race/Ethnicity categories required by No Child Left Behind:**

(Part A - Check ONLY one)

\_\_\_\_ No, not Hispanic/Latino \_\_\_\_ Yes, Hispanic/Latino

(Part B - Check ALL that apply)

\_\_\_\_ American Indian or Alaska Native \_\_\_\_ Asian \_\_\_\_ Black or African American

\_\_\_\_ Native Hawaiian or Other Pacific Islander \_\_\_\_ Caucasian \_\_\_\_ Other

What primary language is spoken at home? \_\_\_\_\_ What is the child's primary language? \_\_\_\_\_

Do you have any concerns regarding your child and his/her development? \_\_\_\_\_

Are special education services needed? \_\_\_\_ Yes \_\_\_\_ No

Does your child have an IEP? \_\_\_\_ Yes \_\_\_\_ No (If yes, attach copy of IEP and evaluations)

**(Please see other side)**

Are any brothers or sisters planning to attend or already attending Penfield Montessori? \_\_\_Yes \_\_\_ No

If yes, sibling's name is \_\_\_\_\_

Does your child have previous Montessori experience? \_\_\_Yes \_\_\_No

If yes, the school's name is \_\_\_\_\_

**Family Information (Please print clearly)**

Parent/Guardian (1): Name \_\_\_\_\_ Email: \_\_\_\_\_

Phone Numbers: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Parent/Guardian (2): Name \_\_\_\_\_ Email: \_\_\_\_\_

Phone Numbers: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Who does the child live with? \_\_\_ Mother \_\_\_ Father \_\_\_ Both \_\_\_\_\_ Other

Will you need child care after school? \_\_\_Yes \_\_\_No

**Please initial:**

\_\_\_\_\_ I understand that Montessori Children's House (K3, K4, K5) is a three year cycle and I commit to sending my child all three years.

\_\_\_\_\_ I understand that Penfield Montessori requires parent engagement and I am anxious to be involved in my child's school and education.

\_\_\_\_\_ I understand that Penfield Montessori requires children to be toilet trained and that the only exception is if the child has a special need that is prohibiting him/her from being toilet trained.

\_\_\_\_\_ I understand that completion of this Intent to Enroll Form does not guarantee admission into the school, but is the first step in the process of obtaining enrollment at Penfield Montessori for my child.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_