



Glen Park Montessori Preschool

647 Chenery Street, San Francisco, CA 94131

gpmontessori@gmail.com

415-585-7701

For staff only:

Application is due at the Parent Visit. Application fee (\$45) is due at the Child Visit.

Date Application Received: _____ Date of Parent Visit: _____

Date of Child Visit(s): _____ Age of child at visit: _____

Desired enrollment term: _____

APPLICATION

Thank you for your interest in Glen Park Montessori! This application is due at the Parent Visit. The \$45 fee is due at the Child Visit. Please refer to our website for our complete enrollment procedures.

Child's Name: _____ Date of Birth: _____

Date of Information Night attended (the first step in the enrollment process): _____

PARENT INFORMATION

Name:

Name:

Cell Phone:

Cell Phone:

Address:

Address:

First, tell us about your child:

What are 3 qualities you most admire in your child?

- 1.
- 2.
- 3.

What are your child's most challenging aspects?

How independent is your child?

1. Is your child potty trained?
2. Can he or she dress themselves?

3. Does he or she use eating utensils?

*Your child is required to be competent in the above 3 questions before being enrolled.

Is your child self-directed or capable of making his or her own choices in “work” or play?

How does your child handle frustration and disappointment?

What does your child like to do by his or herself?

Has your child had any school experience to date? If so, what?

Next, please tell us something about you:

What are your strongest parenting skills?

Parent 1 (please include your name):

Parent 2 (please include your name):

What are your biggest parenting challenges?

Parent 1 (please include your name):

Parent 2 (please include your name):

What do you feel is the most important thing, taking into consideration your talents, gifts and life experiences that you can offer your child?

Parent 1 (please include your name):

Parent 2 (please include your name):

What would you be able to contribute to the school for Parent Volunteer hours? Time (we have school events that need coordinators), talent (music, storytelling, cooking), or professional expertise (painter, handy person, gardener, pet care)?

Do you take family vacations? If so, where do you go?

Are you able to arrange child care for your child during school closure days? (We are closed once a month for Teacher Work Day. The rest of our school calendar can be found on our website.)

Please tell us how you found Glen Park Montessori.

We prefer permission to allow your child's photos to be posted (without names) on our in-house documents, Facebook pages and/or website for educational purposes and community outreach if your child is enrolled at our school. Please acknowledge that you understand and agree to this policy by signing below.

Parent 1 Signature: _____ Parent 2 Signature: _____

I give Glen Park Montessori Preschool my permission to contact my child's previous school or nanny.

Parent 1 Signature: _____ Parent 2 Signature: _____

Contact 1:

Name of school or nanny: _____ Date of care: _____

Email address: _____ Phone number: _____

Contact 2:

Name of school or nanny: _____ Date of care: _____

Email address: _____ Phone number: _____

*We request that you include a photo of your child with this application. This is intended as reference for the Head of School and our staff as we have an extensive number of applicants and seeing a face is helpful in remembering an applicant. Your child's photo will remain secure—we will never use it for any other reason than for recall purposes.

*Please note that we cannot offer your child enrollment until he or she is 2.10 years old, completely potty trained, and competent in all bathroom procedures (pulling up-and-down pants, wiping, proper handwashing, etc.). Thank you for understanding.

Thank you for completing your application. Please only submit your application at your Parent Visit and the \$45 fee at your Child Visit. To schedule visits, email us at schedulevisits.gpm@gmail.com. Please make your check out to:

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