Application for Admission Application must be completed in ink. Oakdale Roseville Minneapolis 1875 W. Perimeter Drive 1125 5th Street S.E. 780 Helmo Ave N. Roseville, MN 55113 Minneapolis, MN 55414 Oakdale, MN 55128 612-378-9375 651-628-9575 651-739-6275 rose@miniapplemontessori.com mpls@miniapplemontessori.com oak@miniapplemontessori.com Application period Sept 1-August 31 of the following year. DATE STARTING SCHOOL _____ Child's Full Name _____ Gender_____Birthdate_____ Infant (6 weeks - 16 months) Toddler (16 months up to 35 months) Level 1 Montessori (35 months - 5 years old) Private Kindergarten (Must be 5 years old by Oct. 1) Sessions: 3 Full Days MTWThF Mon-Fri 5 day Extended Day (Before & After Class) 6:30-8:30 am, 3:30-6pm Parent/Guardian First / Middle / Last Name Email Address Driver's License or Passport No. Occupation ___ Have you ever been convicted of a felony? □Yes □No If so, explain _____ _____ Date of Conviction ____ Home Address City _____ Zip _____ Phone (c) Employed By_____(w)Phone _____ Parent/Guardian First / Middle / Last Name Email Address Driver's License or Passport No. Have you ever been convicted of a felony? Yes No _____ Date of Conviction _____ Home Address

Employed By_____(w)Phone _____

Miniapple International Montessori Schools

Child lives with:	
Name(s)	
Person(s) Responsible	for Tuition*:
Phone	
	are ultimately responsible for tuition and fees.
in the schools, Minia	mitted to providing safe and healthy communities pple may conduct random screening of parents admission and any time after enrollment.
	eared, the child will not be accepted or will be otice. The fees are not refundable.
In case of emergency behalf if I cannot be	y or illness, I authorize the following to act on my reached.
Name	
Address	Phone
Photo ID will be requir	red at the time of pick-up.
application. 1/2 mor child, and is applied to exceed more than on	ration fee of \$100.00 per family must accompany nth nonrefundable tuition deposit is required per o second month of attendance. Start date may not e month from the "date starting school" indicated enrollment may be cancelled and deposit forfeited. k for billing policies.
Invoice # & date in B	W Director Initials
registration fee and tuiti fee and deposit are n	or enrollment must be accompanied by the on deposit before it may be processed. The registration of refundable unless the applicant is not accepted.
	M PROGRAM AND WILL BE EFFECTIVE ON THE
a minimum of 30 days any possible rate char first of the month and is reserves the right to rereason, if in the opinior the program. It is the par Book before the applica Medical/allergies doc the start date. I underst	HE 30 DAY NOTICE. Tuition is subject to change within notice. Every effort will be made to inform families of ages during spring re-enrollment. Tuition is due on the subject to a \$35.00 late fee per week. Miniapple quest that a child be withdrawn, at any time for any to of the school the child does not adjust or benefit from ents' responsibility to receive and understand the Policy ation is submitted. All necessary forms including ICCP, cuments/legal judgements must be submitted before tand and agree to the above terms. I confirm that ded by me is true to the best of my knowledge.
Date	Signature–Parent or Guardian
Date	Signature–Parent or Guardian
Application must be fu	ully completed. If there are two parents/guardians, ate.