Libertyville Montessori School Phone: 847-362-5170

P. O. Box 654 E-mail: Libertyvillemontes@sbcglobal.net Libertyville, IL 60048 www.libertyvillemontessori.com

 **LIBERTYVILLE MONTESSORI SCHOOL**

***APPLICATION FOR ADMISSION FOR PRIMARY***

2020-21 Academic School Year

Application is hereby made for admission of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to the Libertyville Montessori School. The following information is provided as part of this application for 3-6 year olds.

***Home Address*** *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Phone***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street City Zip

***Birthdate****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* ***Sex*** *\_\_\_\_\_\_\_****Age: Yrs.*** \_\_\_\_\_\_\_ ***Mos.*** \_\_\_\_\_\_\_

***Mother's Name*** *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* ***Profession****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

 ***Business Address*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***Bus. Phone*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 ***Family E-mail Address*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***Cell Phone*** *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

***Father's Name*** *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* ***Profession*** *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

 ***Business Address***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***Bus. Phone*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Cell Phone*** *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

In case of emergency, whom do we contact in the immediate area if unable to reach a parent? Please list two:

***Name*** *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* ***Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Name*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***Phone*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

In case of emergency, may we contact your physician?

***Physician's Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Physician's Phone*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Names and Ages of Siblings*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please describe below any family circumstances that may be helpful for us to know, special physical or emotional condition regular medications; special diet; allergies or other treatment your child receives. List other pre‑schools or schools your child has attended:

***Admissions:*** Libertyville Montessori School accepts children of any race, color, and natural or ethnic origin. Acceptance of children is on an individual basis. Consideration is given to class composition and available space and programs.

***Family Discount:*** Families will receive a $100 discount when two or more children are enrolled simultaneously for the

 academic year – this discount applies only to children enrolled in the 5-day program. A discount will also be

 to families who work at major corporations. (Medline, Abbott, Abbvie, Motorola, Walgreens, Baxter, etc) Ask

 for information.

***Returned Checks***: Checks returned due to insufficient funds incur a $25 bookkeeping charge, plus bank charges to Libertyville Montessori School, if any.

***Late Charges***: Tuition payments are due on the 1st day of each month beginning August 1st and ending May 1st. ***A $25 late fee will be automatically assessed on the 6th of those months***, if payment has not been received. If arrangements are not made with the office and you are delinquent in your payments, your child’s position will be forfeited.

***Supply/Party*** There is a one-time supply/party fee of $75.00. This covers the cost of 5 holiday parties, as well as supplies

 ***Fee:*** the children use during work time. (Parents will be responsible for paper towels.)

***Enrollment &***

***Re‑enrollment***: (1) A **$150.00 application fee** is due with this application. ***This deposit is non-refundable***

 ***and non-transferable*** and will be applied toward extracurricular activities such as gym, art, or

 other programs deemed by Libertyville Montessori School.

 (2) Your application, ***with deposit,*** will reserve your child’s position. Enrollments

are on a first come, first served basis and positions will not be held without

a deposit.

***Agreements:***

I agree to permit the participation of the child in the portrayal of Libertyville Montessori School activities in film, slides, photographs or other representations.

I agree to attend parent information evenings and conferences. Libertyville Montessori School assists the child in his development; accordingly, communication among the adults around the child is essential.

I understand and accept Libertyville Montessori School’s policy on the dispensing of medications. I understand Libertyville Montessori School is under no obligation to administer any medications, epipens, etc., in the cases of illness, allergies, or under any other circumstances. Libertyville Montessori School will, in the case of an emergency situation, call 911 first and then notify the parent immediately.

I understand that children are admitted for the full academic year and that my agreement to pay for the school year is not subject to adjustments for illness, absence, vacation, withdrawal or holidays.

This contract may be canceled by either party (Libertyville Montessori School or parent) upon the condition that a 30‑day written notice is provided prior to withdrawal date. The parent will be expected to pay the tuition to cover the time the child attends the school, as well as the 30-day notice time period. Tuition refunds will be prorated 30 days from the date of the written notice. ***If a child is withdrawn after April 1st, there will be no tuition refunds given, and the parent will be responsible for any tuition still outstanding from April 1st, through the end of the academic year.***

I understand that there is a change in regular school hours on special party days.

***Parent Signature*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***Date*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Programs and Tuition 2020-21**

**Ages 3-6 Academic year is: September thru May**

**5 Day**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Select One** | **Options** | **Monthly Fee****(August-May)** | **Yearly Total** | **Days Available** |
|  |  **5 Half Day Morning (8:30-11:30)** | **$551.00** | **$5,510.00** | **Monday-Friday** |
|  |  **5 Half Day With Lunch (8:30-12:30)** | **$653.00** | **$6,530.00** | **Monday-Friday** |
|  |  **5 Day Afternoon (12:15-3:00)** | **$470.00** | **$4,700.00** | **Monday-Friday** |
|  |  **5 Day Afternoon With Lunch (11:30-3:00)** | **$571.00** | **$5,710.00** | **Monday-Friday** |
|  |  **5 Full Day (8:30-3:00)** | **$918.00** | **$9,180.00** | **Monday-Friday** |
|  |  **5 Extended Day (7:30-6:00)** | **$1,099.00** | **$10,990.00** | **Monday-Friday** |

**4 Day**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Select One** | **Options** | **Monthly Fee****(August-May)** | **Yearly Total** | **Days Available** |
|  |  **4 Half Day Morning (8:30-11:30)** | **$481.00** | **$4,810.00** | **M T W TH F** |
|  |  **4 Half Day With Lunch (8:30-12:30)** | **$585.00** | **$5,850.00** | **M T W TH F** |
|  |  **4 Day Afternoon (12:15-3:00)** | **$409.00** | **$4,090.00** | **M T W TH F** |
|  |  **4 Day Afternoon With Lunch (11:30-3:00)** | **$512.00** | **$5,120.00** | **M T W TH F** |
|  |  **4 Full Day (8:30-3:00)** | **$828.00** | **$8,280.00** | **M T W TH F** |
|  |  **4 Extended Day (7:30-6:00)** | **$999.00** | **$9,990.00** | **M T W TH F** |

**3 Day**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Select One** | **Options** | **Monthly Fee****(August-May)** | **Yearly Total** | **Days Available** |
|  |  **3 Half Day Morning (8:30-11:30)** | **$418.00** | **$4,180.00** | **M T W TH F** |
|  |  **3 Half Day With Lunch (8:30-12:30)** | **$515.00** | **$5,150.00** | **M T W TH F** |
|  |  **3 Day Afternoon (12:15-3:00)** | **$344.00** | **$3,440.00** | **M T W TH F** |
|  |  **3 Day Afternoon With Lunch (11:30-3:00)** | **$438.00** | **$4,380.00** | **M T W TH F** |
|  |  **3 Full Day (8:30-3:00)** | **$715.00** | **$7,150.00** | **M T W TH F** |
|  |  **3 Extended Day (7:30-6:00)** | **$895.00** | **$8,950.00** | **M T W TH F** |

**-      In order to reserve a place for your child, an application must be filled out, along with a $150.00 application fee. This fee will be put**

 **aside and used for extracurricular activities such as, gym, art, or other programs deemed by Libertyville Montessori School. This**

 **amount is not refundable.**

**- $100 multiple child discount will be applied toward last tuition payment of the selected tuition payment plan.**

**- Tuition payments are divided into 10 payments, due on the 1st day of each month beginning August 1, 2020 and ending**

 **May 1, 2021. A $25 late fee will automatically be assessed on the 6th day of those months, if payment has not been received.**

 **If arrangements are not made with the office & you are delinquent in your tuition payments, your child's position will be**

 **forfeited.**

**- School is open from 7:30-6:00.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_                \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_         \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ACCEPTED BY LIBERTYVILLE MONTESSORI SCHOOL SIGNATURE OF PARENT/GUARDIAN                    DATE