

Application Pre-School | Primary

I HEREBY APPLY FOR ADMISSION OF THE UNDERMENTIONED CHILD AS A STUDENT OF THE HILLS MONTESSORI SCHOOL INCORPORATED.

Student Details

Surname
Given Names
Residential Address
.....Post Code.....
 Male Female Date of Birth / /

Parent/Guardian Details

PARENT 1 (or Guardian)

Surname
Given Names
Postal Address (if different from residential)
..... Post Code
Occupation
Employer
Telephone Home Business
Mobile
Email

PARENT 2 (or Guardian)

Surname
Given Names
Postal Address (if different from residential)
..... Post Code
Occupation
Employer
Telephone Home Business
Mobile
Email

Special Needs

- Does your child have a known disability?
 Yes (Please state briefly below) No
.....
- Has your child ever received support from, or been assessed by, one of the following:
 Psychologist Speech Therapist
 Physiotherapist Occupational Therapist
- Does your child have any health issues?
 Yes (Please state briefly below) No
.....
- Does your child require a health care plan or emergency action plan?
 Yes (Please state briefly below) No
.....
- Is your child on any regular prescribed medication?
 Yes (Please state briefly below) No
.....

Education Details

Present school / kindergarten (if applicable)
.....
Present year level (if applicable)
Have any of your other children applied for or attended the School?
 Yes No
If Yes, please give names and years of entry.
Name Year
Name Year

Entry Details

I wish to enter my child at the beginning of Term
of 20.....in the following entry level: Please tick below ✓
 Pre-School (3 year old entry)
 Primary (5-12 year old entry) Year Level.....

Have you a preference of Pre-School Group?

Please refer to the Pre-School Class Structure sheet.

- Group 1 Mon, Tues, Wed am
Group 2 Thurs, Fri am
Group 3 Mon, Tues, Wed am
Group 4 Thurs, Fri am

Will your child be continuing through to the Primary section of the school after completing Pre-School?

Yes No Undecided

I have attached a copy of my child's birth certificate, passport or citizenship certificate.

Yes No

Background

Is the student of Aboriginal or Torres Strait Island origin?
For persons of both Aboriginal and Torres Strait Island origin, mark both "Yes" boxes

No Yes Aboriginal Yes Torres Strait Islander

I/We declare that, to the best of my/our knowledge, the information provided in this application is true and correct.

Signature Date/...../.....

Failure to complete accurately all sections of the Application may result in the school's inability to accommodate your child's individual needs and may affect your child's enrolment.

THIS APPLICATION MUST BE ACCOMPANIED BY THE APPLICATION FEE OF \$50 FOR THE FIRST CHILD AND \$20 FOR EACH SUBSEQUENT CHILD.

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