## The Montessori School of New York - International

347 EAST 55 STREET, SUTTON PLACE, NEW YORK, N.Y. 10022-4101
Phone: (212) 223-4630 Fax: (212) 644-7057 Email: info@montessorischoolny.com

Desired Starting Date						
/						
Month	Year					

## **APPLICATION FOR ADMISSION**

2024-2025

(Please Print)									
Child's Name:	(Last)	(First)	(Middle)	ex Date of Birth					
Home Address	s:			. Apt# Zip Code:					
Child's Mother	:		Child's Fathe	<u>er</u>					
<u>Name</u>			<u>Name</u>						
Address			Address						
<u>Telephone</u>			Telephone_						
E-mail			E-mail						
Occupation			Occupation						
Firm name			Firm name						
Type of Busine	ess		Type of Busi	ness					
Personal Reference			Personal <u>Reference</u>						
Address			Address						
Tel:			Tel:						
Please check SESSION and TIMING preferred.									
Full Day:	8:50 a.m 3:30 p.m.		Half Day:	8:50 a.m 12:10 p.m.					
Extended Day:	8:00 a.m 6:00 p.m.			12:40 a.m 3:40 p.m.					

Child's handedness: right □ left □ Language(s) spoken at home:									
Is child adopted?	Doe	es child live with bo	th pare	ents?	••••••				
Name of adult who care	es for child regularly		•••••	relations	ship				
Child's previous school/group care experience:	Name of Institution			Period Attended					
•	*For all children who have attended any classes or schools, please send cottranscripts and recommendations immediately.								
Other children in applicant's family:	Name		Age	Schools Atte	nded				
Please state briefly why y	ou want your child to attend	d Montessori:							
Does your child have any t	talents, special needs, disabil	lities, developmental c	delavs.	allergies, restric	tions? If so, please explain.				
,									
now did you learn about	our school?								
I, the undersigned applicant do	o hereby agree to pay THE MON	ONTRACT	NEW Y	ORK the full annu	al tuition fee in full				
on or before August 1, 2024	or, in the following installments	s:							
		A.M. & P.M. SESSIC	ONS _	FULL DAY	EXTENDED DAY				
Reservation fee (First Pa	yment)	\$4,000.00		\$4,000.00	\$4,000.00				
Payable on September 1,	2024	\$4,800.00		\$4,800.00	\$4,800.00				
Payable on November 1, 2	2024	\$4,500.00		\$4,500.00	\$4,800.00				
Payable on December 1,2	2024	\$4,500.00		\$4,500.00	\$4,800.00				
Payable on January 1 (+ the	relevant extra fee of \$)	\$3,025.00		\$4,025.00	\$4,425.00				
\$525 for 6th & 7th grad	es	\$20,825.00		\$21,825.00	\$22,825.00				
\$1525 for 8th grade									
\$2025 for children belo	w 4 on 8/1/24								
\$3025 for children belo	w 3 on 8/1/24								
been accepted. Should commences I shall be ent	alid only when the reservati the registered child be wi titled to a refund of all tuition shall be waived or refunded	ithdrawn in writing n fees paid <u>except</u> the	<u>prior to</u> e reserv	two weeks k vation fee of \$4	pefore the school year				
I herewith enclose the non-r	refundable application fee of \$2	25.00 and request an ir	nterview	for my child at y	our earliest convenience.				
Date	Signature of Pa	rent							

<sup>\*</sup>Any questions about compulsory extra cost will be answered during the interview and optional costs (trips, concerts, etc.) by <u>note</u> as each occurs.