



APPLICATION TO ENROL – 3-6

(Please print clearly)

Child's Family Name			
Given Names:		Previous Names:	
Date of Birth:		Sex:	M/F (Please Circle)
Address:			
Email Address:			
Country of Birth:		First Language:	

Mother (or Guardian) name:		Previous Names:	
Address: ("As above" if same as child)			
Occupation			
Phone numbers:	Home:	Work:	Mobile:
Country of Birth:		First Language	

Father (or Guardian) name:		Previous Names:	
Address: ("As above" if same as child)			
Occupation			
Phone numbers:	Home:	Work:	Mobile:
Country of Birth:		First Language	

Siblings:	Name	Sex	Date of Birth

Have siblings attended a Montessori school? If so, which school?

Does your child have any additional needs (e.g. medical, social, cultural or religious) or concerns (e.g. medical or developmental) that the Directress may need to know? (Please note that this information is confidential)

Does your child have any childcare experience? (i.e. playgroup, daycare, pre-school)

If English is not your child's first language, does your child speak English? <div style="text-align: center;">Yes No</div>	Is English the language spoken at home? <div style="text-align: center;">Yes No</div>
Is your child of Aboriginal or Torres Strait Island Background? <div style="text-align: center;">Yes No</div>	

Why have you chosen Hills Montessori for your child's education?

What outcomes are you expecting for your child?

Basic sessions are held every day from: 8:30am – 11:30am **OR** 12:30pm – 3:30pm

Please circle your preference:

Morning	Afternoon	Either
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Note: Class allocations are decided by the Directresses and Head of School.

Please note: Progression into the School from Under 3's or another Montessori school is not automatic but these factors will be taken into consideration.

I am interested in Home Environment;

Please circle your preference, if known:

- Extended AM School Care, 7.30am to 8.30am Mon Tues Wed Thu Fri
- Before School Care, 8.30am to 12.30pm Mon Tues Wed Thu Fri
(for Rosellas children)
- After School Care, 11.30am to 3.30pm Mon Tues Wed Thu Fri
(for Brolgas & Kookaburras children)
- Extended PM School Care, 3.30am to 4.30pm Mon Tues Wed Thu Fri

Do you require a translator when communicating with staff? If so, what is your language?

Please complete:

Conditions of Enrolment Application

I/We understand that there is no guarantee of placement.

To be completed by at least one parent or guardian.

I/We the undersigned wish to place our child's name on the Waiting List for Hills Montessori School. I/We have read the conditions and accept them in making this application.

MOTHER/GUARDIAN (Signed) _____ Date: _____

FATHER/GUARDIAN (Signed) _____ Date: _____

OFFICE USE ONLY

Waiting List		Start Date	
Administrative Assistant		PF	
Year of Entry		Observed	
Place Offered		Birth Certificate	

Comments:

“Attended Education Evenings, Open Day”