

# Village Montessori School

105 Hwy 31 Suite 700, Flemington, New Jersey 08822

Tel. 908-782-2333

Dear Parent,

Thank you for your inquiry about Village Montessori School. Enclosed please find our brochure explaining the Montessori method, schedule of programs and a registration application. Our admission procedure is as follows:

1. We ask that all parents observe in the classroom before enrolling their child in the school. If you have not had the opportunity to observe, please call to make an appointment.
2. Application for admission is to be completed and returned to Village Montessori School with the \$50.00 non-refundable application fee.
3. A teacher observation of your child in the Montessori environment and a conference with the Director.
4. Upon acceptance, a contract and full enrollment package is offered to the family.

Choosing the right school for your child is an extremely important decision for your family to make, I hope that the information provided will help. If you have any further questions or would like to make an appointment to view the school and meet the staff please do not hesitate to call.

I look forward to hearing from you soon.

Sincerely,

-----  
Alison L. Fleisher  
Director

Applying for 20\_\_\_\_  
 Full Day  
 Half Day am pm  
 Lunch Program

**Village Montessori School** ♦105 HWY 31 ♦ Flemington ♦ New Jersey ♦ 08822 ♦ 908-782-2333  
**Application**

---

**CHILD**

\_\_\_\_\_  
First Middle Last

Male

\_\_\_\_\_  
Birthdate Age years months

Female

**Previous School Experience\***

\_\_\_\_\_  
Montessori School duration

\_\_\_\_\_  
School duration

\_\_\_\_\_  
Playschool duration

Reason for applying to VMS:

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

---

**MOTHER**

**FATHER**

\_\_\_\_\_  
Mother's Name

\_\_\_\_\_  
Father's Name

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Email

\_\_\_\_\_  
Email

\_\_\_\_\_  
Occupation

\_\_\_\_\_  
Occupation

\_\_\_\_\_  
Business Address

\_\_\_\_\_  
Business Address

\_\_\_\_\_  
Business Phone

\_\_\_\_\_  
Business Phone

**BROTHERS & SISTERS**

**GRANDPARENTS**

\_\_\_\_\_  
\_\_\_\_\_  
Names and ages

\_\_\_\_\_  
\_\_\_\_\_  
Names and addresses

---

\*Village Montessori School reserves the right of direct access to previous school records and further reserves the right to withhold records of withdrawing students until all accounts due are paid in full.

# HEALTH

Pediatrician's Name \_\_\_\_\_

Allergies \_\_\_\_\_

Address \_\_\_\_\_

Restrictions \_\_\_\_\_

Phone \_\_\_\_\_

Physical Impairments \_\_\_\_\_

Vision  
Left \_\_\_\_\_ Right \_\_\_\_\_  
Hearing  
Left \_\_\_\_\_ Right \_\_\_\_\_

---

## APPLICATION PROCEDURE

1. Submit application and non-refundable fee of \$50.00 to Village Montessori School.
2. All prospective students and parents must be interviewed by the Headmistress.
3. Upon acceptance the tuition deposit is due (applicable to tuition).

*Village Montessori School has a non-discriminatory policy relative to race, color, and national origin with respect to the admission of students and employment of faculty and administrative staff.*

*Village Montessori School considers the records of all individual students to be confidential information available to a child's parents or guardians upon request. Records will only be released to other schools or agencies upon signed request from a parent or guardian and only after all accounts due are paid in full.*

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

---

## TUITION AND FEES

Registration Fee: \$50.00 (Non-Refundable)      Tuition Deposit: \$350.00 (non-refundable, but applicable to tuition)

Half Day Tuition: \$5,250.00 per year  
9:00 – 12:00 pm or 1:00 – 4:00 pm      Full Day Tuition: \$10,500.00 per year (lunch program included)  
9:00 – 4:00PM

Lunch Program \$950.00 per year  
12:00 – 1:00PM      Before Care: \$950.00 per year  
8:00AM – 9:00AM

**Tuition to paid in five installments. Enrollment obligates parents to payment of a full year's tuition.**

---

## OFFICE USE ONLY

Date of Interview \_\_\_\_\_       Application Fee       Full Day       Half Day  
Date of Enrollment \_\_\_\_\_       am  
First Day of Class \_\_\_\_\_       Tuition Deposit       Lunch Program  
 pm

Date of Withdrawal \_\_\_\_\_       Years with VMS       Referrals Sent       Public       Private

Reason for leaving \_\_\_\_\_

Forwarding Address \_\_\_\_\_