



Enrollment Application

Date of Application _____

Student's Full Name _____
Last First Middle

Preferred Name or Nickname _____ Age _____

Date of Birth _____ Country of Birth _____ Citizen of _____

Language(s) spoken at home _____

Requested hours:

Regular Hours:

Primary (3-4.9yrs)

Pre-Primary (2-3yrs)

8:30am - 1:00pm

8:30am - 12:30pm

8:30am - 3:30pm

8:30am - 3:30pm

Extended Day Hours:

Primary (3-4.9yrs)

Pre-Primary (2-3yrs)

8:00am – 8:30am

3:30pm – 6pm

3:30pm – 5:30pm

School Information

Present Grade/Class _____ Language(s) of instruction at school _____

Current School/Day Care _____ Address _____

Previous School(s) _____ Address _____

Requested Start Date _____

Family Information

Parent/Guardian

Parent/Guardian

Name _____

Address _____

Home phone _____
Home Cell _____

Home Email _____

Employer _____

Work Address _____

Work Phone _____
Work Cell _____

Work Email _____

If parents are separated or divorced, with whom does the applicant live? _____

Who is or are the legal guardians of the applicant? _____

Address & phone numbers of legal guardian (if different from parents) _____

To whom should correspondence be addressed? _____

Name the step-parent(s) in the applicant's home _____

Please list the **names** and **ages** of siblings, and the **schools** they attend:

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____

Other Information

Upon enrollment, may we share your name/address/phone number with other enrolled families? (check one) Yes No

How did you learn about little elephant montessori preschool? _____

Signatures

Signatures of Parent or Guardian(s) _____

Please return this form to: little elephant montessori preschool
5782 Miles Ave
Oakland, CA 94618
(510) 338-0084