



2008 McGee Ave. Berkeley, CA 94703 Tel: (510) 679 5056
www.littleelephant.net

Enrollment Application

Date of Application _____

Student's Name _____
Last First Middle

Preferred Name or Nickname _____ Age _____

Date of Birth _____ Country of Birth _____ Citizen of _____
MM/DD/YYYY

Language(s) spoken at home _____

School Information

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

Current School/Daycare _____ Address _____

Previous School(s) _____ Address _____

_____ Address _____

_____ Address _____

Requested hours (all schedules are for Monday - Friday)

Primary Classroom

Regular Hours

8:30 AM to 12:30 PM

8:30 AM to 3:30 PM

Extended care Hours

8:00 AM to 8:30 AM

3:30 PM to 6:00 PM

Requested Start Date _____

Parent/Guardian

Parent/Guardian

Name _____

Name _____

Address _____

Address _____

Home Phone _____

Home Phone _____

Cell Phone _____

Cell Phone _____

Home Email _____

Home Email _____

Employer _____

Employer _____

Work Address _____

Work Address _____

Work Phone _____

Work Phone _____

Work Cell _____

Work Cell _____

Work Email _____

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 _____

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

Name _____ Age _____ School _____

Name _____ Age _____ School _____

Name _____ Age _____ School _____

Name _____ Age _____ School _____

Name _____ Age _____ School _____

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 School? _____

Signatures

Signature of Parent or Guardian _____ Date _____

Relationship to applicant _____

Signature of Parent or Guardian _____ Date _____

Relationship to applicant _____

Please return this form along with a photograph of your family and a \$50 application fee to:

natanya@littleelephant.net

little elephant too!
2008 McGee Ave
Berkeley, CA 94703
(510) 679.5056