



School District No. 43 (Coquitlam)
APPLICATION FOR THE
MONTESSORI PROGRAM OF CHOICE
for September, 2017

PLEASE PRINT CLEARLY -
Communication will be
conducted via email.

DEMOGRAPHIC INFORMATION:

My child will be entering: [ ] Kindergarten [ ] Grade 1
Child(ren)'s Name: \_\_\_\_\_
Address: \_\_\_\_\_
Postal Code: \_\_\_\_\_ Home Tel. No: \_\_\_\_\_
Child(ren)'s Birthdate: \_\_\_\_\_ Male [ ] Female [ ] Twins [ ]
Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_
Father's Alternate Ph. No.: \_\_\_\_\_ Mother's Alternate Ph. No.: \_\_\_\_\_
Father's Email: \_\_\_\_\_ Mother's Email: \_\_\_\_\_

PLACEMENT INFORMATION:

Please list any serious disabilities, difficulties or medical problems of which we should be aware:
Has your child(ren) previously attended pre-school? Yes: [ ] No: [ ] How many years? \_\_\_ Name of Pre-School: \_\_\_\_\_
What is your catchment/neighbourhood school? \_\_\_\_\_ Language spoken at home: \_\_\_\_\_
If a sibling is currently enrolled in the Montessori program, please provide name / grade / school: \_\_\_\_\_
Indicate the school you wish your son/daughter to attend in order of preference (i.e. 1, 2, 3, etc). Please be sure you are willing to accept a spot at your 2nd or 3rd, etc. choice before putting it down as a choice.
Aspenwood \_\_\_ Baker Drive \_\_\_ Hampton Park \_\_\_ Harbour View \_\_\_ James Park \_\_\_ Miller Park \_\_\_ Seaview \_\_\_
Have you applied to another program of choice other than Montessori? Yes: [ ] No: [ ]
If so, please name Montessori or the other program as your first priority. \_\_\_\_\_

PLEASE NOTE:

- Placement in the Montessori Program will be determined, based on space availability, through a random selection process first priority being given to school district residents (proof of residency will be required by the school upon registration).
• Transportation, if required, is the responsibility of the parent.
• If a placement is offered and is turned down, the applicant will go to the bottom of the wait list for any future considerations, so please familiarize yourself with the location of the school before you mark it down as a choice.

Signature of Parent/Guardian: \_\_\_\_\_

REGISTRATION DEADLINE: JANUARY 18, 2017, 4:30 PM

Hand deliver or mail to the School Board Office, 550 Poirier Street, Coquitlam, BC V3J 6A7
OR scan and email to Myra Crosley, mcrosley@sd43.bc.ca
(Students registered after January 18th will be placed on a wait list.)