

The Montessori Day School, Inc.

5801 Carmel Ave. N.E
Albuquerque, NM 87113
(505) 822-0140

New Student Interview Application

Child's Name _____ Date of Birth _____ Gender M __ F __

Child's Address _____

Current School _____ (if applicable)

Sibling(s): _____ Gender M __ F Date of Birth

_____ Gender M __ F Date of Birth

_____ Gender M __ F Date of Birth

_____ Gender M __ F Date of Birth

Mother's Name _____ Phone #

Home Address _____ Business Address

Father's Name _____ Phone #

Home Address _____ Business Address

Your answers to the following questions will enable us to get a sense of your family and your familiarity with Montessori education. Please feel free to answer fully. You are welcome to attach another sheet of paper if required more space.

Are you familiar with the Montessori Method of teaching and learning?

What materials have you read about the Montessori Method?

What aspects of the Montessori philosophy are most appealing to you, and why?

What are the main factors in your decision to apply to The Montessori Day School ?

What are your principal goals for your child while he/she is a student here?

Our school serves children Toddler, Preschool and K-6th . Through what level do you plan to have your child attend The Montessori Day School? What factors will impact your decision?

The Montessori Day School is very dependent upon the involvement of its families to create a strong community for our children. In what manner do you envision your family becoming involved with the school and parent network activities?

Thank you for taking time to fill out this application form completely. The information contained in it will be kept confidential. Please return this Interview Application with the \$25.00 non-refundable application fee. Providing this information and fee does not ensure enrollment into the school.

Signature of Parent: _____