

# White Pines Montessori Academy

## APPLICATION FOR ADMISSION

Student's Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

### Application For:

\_\_\_\_ Precasa Morning

\_\_\_\_ Precasa Full Day

\_\_\_\_ Elementary

\_\_\_\_ Casa Morning

\_\_\_\_ Casa Afternoon

\_\_\_\_ Casa Full Day

Father's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

\_\_\_\_\_ email: \_\_\_\_\_

Work Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_

\_\_\_\_\_ email: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

\_\_\_\_\_ email: \_\_\_\_\_

Work Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_

\_\_\_\_\_ email: \_\_\_\_\_

### Siblings:

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_