

# Ruffing Montessori School Application for Admission

1285 Orchard Park Drive • Rocky River, Ohio 44116 • (440) 333-2250 • [www.ruffingmontessori.org](http://www.ruffingmontessori.org)

**Child's Full Name** \_\_\_\_\_ **Nickname** \_\_\_\_\_ **Gender** \_\_\_\_\_

**Date of Birth** \_\_\_\_\_ **Grade or Pre-Primary Level in Fall** \_\_\_\_\_

**Parents' Full Names** \_\_\_\_\_ (father) \_\_\_\_\_ (mother)

**Address** \_\_\_\_\_ (street) \_\_\_\_\_ (city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip)

**Email Address(es)** \_\_\_\_\_

**Occupations** \_\_\_\_\_ (father) \_\_\_\_\_ (mother)

**Telephone** \_\_\_\_\_ (home) \_\_\_\_\_ (father work) \_\_\_\_\_ (father cell)  
\_\_\_\_\_ (mother work) \_\_\_\_\_ (mother cell)

**Previous Schools Attended By Applicant:**

Name \_\_\_\_\_ Location \_\_\_\_\_ Dates \_\_\_\_\_  
Name \_\_\_\_\_ Location \_\_\_\_\_ Dates \_\_\_\_\_

**Other Children in Family:**

Name \_\_\_\_\_ Age \_\_\_\_\_ Name \_\_\_\_\_ Age \_\_\_\_\_  
Name \_\_\_\_\_ Age \_\_\_\_\_ Name \_\_\_\_\_ Age \_\_\_\_\_

**Please Provide Two Personal References:**

Name \_\_\_\_\_ Phone \_\_\_\_\_ Name \_\_\_\_\_ Phone \_\_\_\_\_

Ruffing family:  Yes  No

Ruffing family:  Yes  No



An application fee of \$50.00 must accompany this application. It is non-refundable and it does not apply towards tuition. Ruffing Montessori does not discriminate on the basis of race, sex, or national origin in the administration of its educational policies. Ruffing admits students of any race, color, sex, or national or ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to the students at the school.

I hereby apply for the admission of \_\_\_\_\_ to Ruffing Montessori School and agree to abide by the rules and regulations thereof.

Signature of parent or guardian \_\_\_\_\_ Date \_\_\_\_\_

## Ruffing Montessori School Application for Admission Part 2

1. What do you understand about Montessori philosophy? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Have you read any books on Montessori philosophy? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. What educational goals do you have for your child? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. How do you see Ruffing assisting you in meeting these goals? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. How would you describe your child's personality and learning style? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. How does your family enjoy spending time together? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. What do you see as your child's strengths? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

8. Please specify any special educational, physical or emotional needs of your child (i.e., allergies, IEP's etc.).

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_