



our house
montessori

2020/2021 application

information about your child

child's name:	date of birth:	age on 9/1/2020
child's primary address:		

parent information

full name	cell phone	home phone
home address		
email address		
employer	occupation	
hobbies & interests		

parent information

full name	cell phone	home phone
home address		
email address		
employer	occupation	
hobbies & interests		

other members of your family

name	age
name	age
name	age

assorted information

previous childcare:

current childcare:

opportunities to work with other children:

name of pediatrician:

name of pediatrician's practice:

child's primary language:

other languages spoken in the home:

please list any past/present medical/developmental concerns or allergies of which we should be aware:

please describe your child's personality, social skills, learning style and temperament:

please list any additional information you would like to share about your child:

your expectations

what experience do you have with montessori? have you researched or read any books about the philosophy?

your expectations

what is your understanding about the montessori method of teaching and learning?

what goals/expectations do you have for your child's enrollment in our program?

how did you hear about us?

desired schedule

please indicate your desired schedule below. if you have flexibility, please indicate your order of preference.

program	selection(s)
morning (8-12/12:30)	
full day (8-3)	
extended day (8-6)	

if you need a custom schedule (ex. 3 full days, 2 extended days), please indicate your needs below:

signatures

please sign below and return the completed application along with a non-refundable \$50 application fee to:

our house montessori
1733 spring garden st.
phila., pa 19130

applications may also be emailed to info@ourhousemontessori.org with the application fee to be paid via online invoice.

Signature(s):

X _____ Print Name: _____ Date: _____

X _____ Print Name: _____ Date: _____

child info application supplement

additional information about your child & family	
child's name:	date of birth:
where and with whom does your child spend the day:	
with whom does your child live? both parents at same address <input type="checkbox"/> both parents at different addresses <input type="checkbox"/> one parent <input type="checkbox"/> other guardian <input type="checkbox"/>	are parents separated or divorced? Yes <input type="checkbox"/> No <input type="checkbox"/> does child have any siblings? Yes <input type="checkbox"/> No <input type="checkbox"/>
what time does your child... awake in the morning? _____ go to bed at night? _____	does your child nap? Yes <input type="checkbox"/> No <input type="checkbox"/> if so, what time is nap? _____ how long do they nap? _____
where does your child sleep at night? Crib <input type="checkbox"/> Bed <input type="checkbox"/> Parent/Sibling's Bed <input type="checkbox"/>	how does your child fall asleep? by themselves <input type="checkbox"/> with a pacifier/nursing <input type="checkbox"/>
what age did your child begin to speak? ____ how many words do they have? _____	what age did your child begin to walk? ____ do they ever practice on stairs? Yes <input type="checkbox"/> No <input type="checkbox"/>
Does your child have chances to self-calm? Yes <input type="checkbox"/> No <input type="checkbox"/> If so, how? _____ _____	Is your child toilet independent? Yes <input type="checkbox"/> No <input type="checkbox"/> If so, do they wear a diaper/pull-up at nap? Yes <input type="checkbox"/> No <input type="checkbox"/>
does your child...	
If so, how often? drink from a bottle? Yes <input type="checkbox"/> No <input type="checkbox"/> _____ use a pacifier? Yes <input type="checkbox"/> No <input type="checkbox"/> _____	If so, how often? use a lovey object to sleep (blanket, animal, sleep sack)? Yes <input type="checkbox"/> No <input type="checkbox"/> _____ have chances for independent play away from adults? Yes <input type="checkbox"/> No <input type="checkbox"/> _____
what are your child's favorite activities?	what are your child's least favorite activities?



2020/2021 tuition schedule

all children must attend 5 days a week. tuition covers enrollment for the 2020/2021 school year beginning in September 2020 for all operating days. please see school calendar for detailed schedule.

Program	Tuition
morning toddler (8:00-12:00) primary (8:00-12:30)	\$14,280
full day (8:00-3:00)	\$17,145
extended day (8:00-6:00)	\$20,180

if your family requires a mixed schedule (ex. 3 full days and 2 mornings), please contact OHM to discuss availability & pricing

tuition is payable based on one of the following schedules:

	quarterly	semi-annual
deposit	\$1,000 deposit due with enrollment agreement	
payment 1:	25% due 4/1/2020	50% due 6/1/2020
payment 2:	25% due 7/1/2020	remainder due 12/1/2020
payment 3:	25% due 10/1/2020	
Payment 4:	remainder due 1/1/2021	

drop-in care

drop-in care rates for morning & full day students on an as-needed basis (based on available space).

one additional period	\$35
two additional periods	\$70

lunch groceries

lunch is prepared from scratch with the children daily and is an important part of our program. our families take turns bringing in groceries on a rotational basis to provide ingredients for each meal. generally, the cost associated with this is about \$100 every two months.

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(215) 701-3937

info@ourhousemontessori.org
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