



# The Peace Rose Montessori School

3091 Bordentown Avenue, Parlin, NJ 08859----732-518-8745  
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## APPLICATION FOR ADMISSION Preschool-Kindergarten (Ages 3-6)

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address (Street): \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

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

Mother/Guardian Name: \_\_\_\_\_

Employer Name & Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Father/Guardian Name: \_\_\_\_\_

Employer Name & Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Child Lives With: \_\_\_\_\_ Other Children in the Family (Names & Ages): \_\_\_\_\_

Tell us a little about your child such as their likes, dislikes, personality traits or anything else that may help us get to know your child better. How do you calm them when they are upset?

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Any special Needs (medications, allergies, physical, emotional and/or other) that we should be aware of to better understand your child. (Next page...)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Child's Doctor:**

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

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

**Child's Health Insurance:**

Name of Insurance Plan: \_\_\_\_\_ ID# \_\_\_\_\_

Subscriber's Name on Insurance Card: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

**\*Registration/Enrollment Fees are NON-REFUNDABLE.**

Mother: Print Full Name: \_\_\_\_\_ Sign: \_\_\_\_\_

Father: Print Full Name: \_\_\_\_\_ Sign: \_\_\_\_\_

**How did you hear out about us? (please check any that apply)**

- Sign in front of building
- Other Sign (Location:) \_\_\_\_\_
- Newspaper/Magazine name: \_\_\_\_\_
- Referral Name: \_\_\_\_\_
- Yelp
- www.thepeaceroase.com
- Online Search (which search engine? Yahoo, Google...) \_\_\_\_\_
- Other: \_\_\_\_\_

**Please indicate the program you are interested in: (please check all that apply)**

5 FULL DAYS 8:45am-3:15am \_\_\_\_\_ *Before Care 8am-8:45am* \_\_\_\_\_

5 HALF DAYS 8:45am-11:45am \_\_\_\_\_ *After Care 3:15pm-6pm* \_\_\_\_\_

3 FULL DAYS (M, T, W--8:45am-3:15am) \_\_\_\_\_

3 HALF DAYS (M, T, W--8:45am-11:45am) \_\_\_\_\_