

**KANSAS CITY, MISSOURI SCHOOL DISTRICT
MONTESSORI SCHOOLS
APPLICATION FOR THE 2009-2010 SCHOOL YEAR
PRE-K 3 & PRE-K 4 STUDENTS ONLY**

Please complete both sides of this application in order for the Admissions Office to process your child's application.

STUDENT INFORMATION

Student's Legal Name: _____
Last
First
Middle

Student #: If Known					
For Office Use Only:					
S203	S313	S314	S315	S317	S320
HMLS: Y N LNG: Y N MI: Y N					

Student's Social Security Number: ____/____/____
(optional)

Student's Date of Birth: ____/____/____

Student's Gender: Male Female

Student's Grade for the 2009-2010 school year: _____

(Students must be 3 years old by September 1st, 2009)

FOR OFFICE USE ONLY: DATE STAMP

ETHNIC CODE:

American Indian/Alaskan Native Hispanic Asian/Pacific Islander White Black

Parent/Guardian Name: _____
Last
First
Middle
Relationship

Street Address of Parent/Guardian: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Work Phone: (____) _____ (Ext.) _____ Cell Phone: (____) _____

E-mail: _____

Name of School Last Attended: _____ City: _____ State: _____

Is your student currently on long term suspension or expulsion? Yes No Has your student ever been suspended or expelled? Yes No

If Yes, Date: ____/____/____ Reason: _____

FAMILY INFORMATION:

1. Emergency Contact Person: _____ Relationship: _____ Phone: (____) _____

2. Emergency Contact Person: _____ Relationship: _____ Phone: (____) _____

SIBLING INFORMATION:

Do you want this child to attend the school a brother or sister is already attending? Yes No If yes, you must mark the school as a choice on this form and complete the following information for the brother/sister currently attending the school.

Name: _____ Date of Birth: ____/____/____
Last
First
Middle

SPECIAL INFORMATION:

Does your child receive any Exceptional Education Services? Yes No

Does your child have an IEP? Yes No

SCHOOL CHOICE:

Please indicate your 1st and 2nd choice **ONLY**. Every effort will be made to place your child in the school of your choice.

*Note: Students currently enrolled in Montessori Schools are not required to reapply. Once a student is OFFICIALLY ASSIGNED TO A MONTESSORI SITE they will be removed from all existing MONTESSORI wait lists.

____ Border Star Montessori ____ Faxon Montessori ____ Holliday Montessori ____ Hale/Cook Early Childhood Center

FOR OFFICE USE: S1: _____ R1: _____ E: _____ S: _____ H: _____ DB: _____

FOR OFFICE USE: S2: _____ R2: _____ E: _____ S: _____ H: _____ DB: _____

Student Name

Student Number

To help determine whether your child qualifies for a federal program, please circle "yes" or "no" in response to the following questions.

1. Does the student speak a language other than English?Yes No
If yes, what language spoken? _____
2. Is the language other than English spoken in the home?Yes No
3. Do you currently reside with another family,
someone other than family or in a temporary housing facility?Yes No
4. Does the parent/guardian work for the federal government?Yes No
5. Do you live in federally subsidized housing?Yes No
6. Has either parent, guardian, child or child's spouse been employed within the past three years (or any of the
aforementioned currently employed) in some form of temporary or seasonal agriculture work such as:

Planting or harvesting crops / Transporting farm products to marketYes No

Working on a dairy or catfish farm / Feeding or processing poultry, beef or hogs

Cutting firewood or logs to sell / Gathering eggs or working in hatcheries

Public Information Release

The Public Information Office strives to publicize and promote the accomplishments of our students - awards, competitions, human interest stories and other events that highlight the many successes which occur in our school district. Should the opportunity arise for students to be featured in media-related projects, only children with completed releases will be considered. Please complete and sign release

I, _____ am the parent/legal guardian of, _____. I hereby give my consent and permission for my child to be on radio, photographed or videotaped for use in news stories/promotional material about/for the Kansas City Missouri School District. The consent applies only to the use of my child for non-profit, non-commercial purposes by the Kansas City Missouri School District, news organizations or agencies representing the Kansas City Missouri School District. This consent remains in effect until revoked in writing.

Name of Child/Minor

Parent/Guardian Signature

The signature of a parent or guardian is required for this application to be valid.
The Kansas City, Missouri School District may find it necessary to adjust placements due to organizational changes.

I have correctly listed all information on this application form.

Parent/Guardian Signature

Date

Student Directory Release

Schools publish a directory of students' names, addresses and phone numbers to allow students and parents to contact each other. Please mark one of the boxes below to inform your child's school whether you would like your child's information in the student directory and sign below.

- I give my child's school permission to publish his/her name, address and phone number in the student directory.
- Please do not publish my child's address or phone number in the student directory.

Name of Child/Minor

Signature of Parent/Guardian

Parent E-mail



Kansas City, Missouri School District
1211 McGee Street, Room 100
Kansas City, Missouri 64106

For Additional Information, call Admissions at 816-418-7505.
Please Visit Our Website: www.kcmsd.net

NOTICE OF NON-DISCRIMINATION

The Kansas City 33 School District does not discriminate on the basis of sex, race, color, national origin, ancestry, age, disability, sexual orientation, gender identity, or any other factor prohibited by law in its programs and activities. If you believe you have been subject to discrimination or harassment, or if you have any inquiries regarding the District's non-discrimination policies, please contact the Anti-Discrimination and Harassment Coordinator at 1211 McGee, Suite 1103 Kansas City, Missouri 64106, call (816)418-7610