

Hopewell Montessori School

450 Harmony Grove Church Road
Acworth, Georgia 30101
(770) 917-0507

Application for Enrollment

Date _____

Student's Name _____ Birthdate _____ Gender _____
Last First Middle

Address _____ Phone (____) _____

Previous Schools Attended:

Siblings:

School Dates

Name Age School

School Dates

Name Age School

School Dates

Name Age School

Mother's Name _____ Father's Name _____

Address _____ Address _____

Cell Phone _____ Cell Phone _____

Occupation _____ Occupation _____

Employer _____ Employer _____

Work Phone (____) _____ Work Phone (____) _____

Other adult with whom child lives _____

Which program are you interested in? _____ Infant/Toddler Program _____ Primary Program

_____ Half Day _____ School Day _____ All Day

_____ 5 Days _____ T/Th (infant/toddler only) _____ M/W/F (infant/toddler only)

Will your child need early arrival (7:00-8:30am)? ___Yes ___No

Referred by: _____

Application Procedure:

1. Schedule classroom observation.
2. Submit completed application with \$50 fee (non-refundable).
3. Parent interview with Director of Education.
4. Upon acceptance, registration fees are due.