

New Student Application Form

-Office Use Only-

Student ID# _____

Student Start Date _____

School Year _____ Grade Entering _____ Today's Date _____

Student Information

Legal first name		Legal middle name (or none)		Legal last name		Date of Birth (mm/dd/yy)	
Gender		Current Grade		Ethnicity is based on your nationality, religion and language. Do you consider yourself Hispanic?			
M F				Yes No			
Race is based on your inherited physical characteristics (Check one or more)						Student cell#	
American Indian/Alaskan Native		Asian		Black/African American		Hawaiian/Pacific Islander White	
Is English the primary language spoken at home?				Language to home			
Yes No							
Country of birth				State of birth			
Do you have any court orders or legal documents you need added to your student's file (i.e. Custody, Parental Plans, etc.)?						Yes No	
Last school attended		City		State		How did you hear about us?	
Main/Physical Address				Mailing Address (if different than Main/Physical Address)			
Streets Address				Street Address or PO Box #			
City		State		Zip		City	
If your child will be attending this school as School Choice and you would like to request transportation, please request a <i>School of Choice Transportation Application</i> –or– if you would like to request transportation to or from a location other than your home, please request an <i>Alternative Transportation Application</i> . For these circumstances, transportation is not guaranteed and is dependent upon existing routes and space availability.							

The following section is for Parent Guardian information only. Emergency contact information is to be entered in the Emergency Contacts section on page 2.

Parent/Guardian Information

Parent/Guardian Information #1				Lives with? <input type="checkbox"/> Yes <input type="checkbox"/> No				Parent/Guardian Information #2				Lives with? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Last Name		First Name		Financially Responsible				Last Name		First Name		Financially Responsible					
				Yes No								Yes No					
Street Address						Street Address											
City		State		Zip				City		State		Zip					
Relationship to student						Relationship to student											
Contact allowed?*		Educational Rights?*		Mailings?		Release to?		Contact allowed?*		Educational Rights?*		Mailings?		Release to?			
Yes No		Yes No		Yes No		Yes No		Yes No		Yes No		Yes No		Yes No			
Parent/Guardian #1 Contact Information						Parent/Guardian #2 Contact Information											
		Home Phone		Cell Phone		Work Phone				Home Phone		Cell Phone		Work Phone			
Phone Numbers ►								Phone Numbers ►									
Primary (select one)								Primary (select one)									
SMS (text)								SMS (text)									
Attendance								Attendance									
Primary Email								Primary Email									
Email #2								Email #2									

* **Contact Allowed:** Individual can be contacted by the school in non-emergency situations** **Educational Rights:** Individual can make decisions and receive information about student's education. It also includes authorization to obtain access to ParentVUE, the online application which displays student information.

Student's Siblings (Enter only siblings attending K-12 PSD schools.)

Sibling name		Grade		School Attending		Sibling name		Grade		School Attending	

Student first name	Student last name	Birth date

-Office Use Only-

Student ID# _____

Enrollment History

Date your student first enrolled in a Colorado school*		Date your student first enrolled in a U.S. school	
Date your student first re-enrolled into a Colorado school* after attending a school outside the state of Colorado		Date your student re-enrolled into a U.S. school after attending a school outside of the U.S.	
Has your child ever... (if applicable)	skipped a grade	If so, which grade?	
	been retained in a grade		

* Colorado school (K-12 public, non-public or U.S. military base schools). Do NOT include home school or Pre-K.

Programs & Services

Has student ever been expelled from a school?	If Yes, enter name and address of school	If Yes, enter expulsion date
Yes No		
Has student ever been referred for a Risk Assessment?	Was a Safety Plan developed as a condition for student's return to school?	
Yes No	Yes No	
Is student enrolled in another Colorado School including distance and online schools?		Yes No
If Yes, enter name and address of the school:		
Has your child received Special Education services?	Yes No	Has your child received Section 504 services?
What year was IEP last reviewed?		Is the 504 health related?
Has your child had a specialized health care plan?	Yes No	Has your child received Gifted Education services?
		Yes No

For Children Entering Preschool or Kindergarten

Please choose one:

Full-Day

Half-Day

In the past two years, what daytime care/early learning development did your child receive?	Stayed at home with parent/caregiver
	Attended a private home-based child care (please provide name)
	Attended Preschool (please provide name)
	Other (Please explain)

Emergency Contacts

In cases where the parent/guardian cannot be reached, the student can be released to individuals listed as Emergency Contacts.

Contact #1	Contact #1 last name		Contact #1 first name		Relationship to student	
Enter phone numbers for this contact in the order they should be called in case of an emergency. Under Type (of phone), enter a letter: H – Home W – Work C – Cell O – Other						
Phone #1	Type	Phone #2	Type	Phone #3	Type	Release to?
						Yes No

Contact #2	Contact #2 last name		Contact #2 first name		Relationship to student	
Enter phone numbers for this contact in the order they should be called in case of an emergency. Under Type (of phone), enter a letter: H – Home W – Work C – Cell O – Other						
Phone #1	Type	Phone #2	Type	Phone #3	Type	Release to?
						Yes No

Contact #3	Contact #3 last name		Contact #3 first name		Relationship to student	
Enter phone numbers for this contact in the order they should be called in case of an emergency. Under Type (of phone), enter a letter: H – Home W – Work C – Cell O – Other						
Phone #1	Type	Phone #2	Type	Phone #3	Type	Release to?
						Yes No

I voluntarily provide this information to my child's school and understand that it is confidential and is only shared with staff on a need-to-know basis.

Parent/Guardian Signature

Date

Student first name	Student last name	Birth date

—Office Use Only—

Student ID# _____

Health Information

Doctor	First Name:	Last Name:	Phone Number:	Name of Practice:

Student Health Conditions (Check Yes or No below and explain when necessary.) Please contact the Health Office to provide additional comments									
ADD	Yes	No	ADHD	Yes	No	Developmental delay	Yes	No	
Allergies to animals	Specify:		Yes	No	Diabetes: Type I	Yes	No	Diabetes: Type II	Yes No
Reaction:					Head injury/concussion			Yes	No
Allergies to insects	Specify:		Yes	No	When?				
Reaction:					Heart problems	Specify:		Yes	No
Allergies to medication	Specify:		Yes	No	Restrictions:				
Reaction:					Kidney/urinary problems			Yes	No
Allergies/environmental	Specify:		Yes	No	Explain:				
Reaction:					Headache	Yes	No	Migraine	Yes No
Allergies to food	Specify:		Yes	No	Orthopedic problems			Yes	No
Reaction:					Explain:				
Other dietary needs	Specify:		Yes	No	Seizures	Specify:		Yes	No
Notes:					Explain:				
Food intolerance	Specify:		Yes	No	Neurological problems	Specify:		Yes	No
Notes:					Explain:				
Anxiety	Depression		Bipolar		Stomach problems			Yes	No
Yes No	Yes No		Yes No		Explain:				
Asthma	Yes	No	Rescue Inhaler	Yes	No	Other			Yes No
Autism	Yes	No	Asperger's	Yes	No				
Cancer			Yes	No					
Explain:									

Student Vision and Hearing Conditions					
Does your child have vision problems?	Yes	No	If Yes, are glasses/contacts worn for reading at close range?		Yes No
			If Yes, are glasses/contacts worn for distance vision?		Yes No
Does your child have hearing problems?	Yes	No	If Yes, is a hearing aid worn?		Yes No
			If Yes, is preferential seating needed?		Yes No
Student Emergency Steps					
Could your child's health condition warrant special EMERGENCY steps that his/her bus operator should know?					Yes No
If Yes, please explain					

A separate written **Authorization and Release** must be submitted each school year for each medicine to be administered to a student at school

Student Medications (List medications student is taking.)		
For what condition?	Name of medication	Does this medication need to be given at school?
		Yes No
For what condition?	Name of medication	Does this medication need to be given at school?
		Yes No
For what condition?	Name of medication	Does this medication need to be given at school?
		Yes No
For what condition?	Name of medication	Does this medication need to be given at school?
		Yes No

I voluntarily provide this health information to my child's school and understand that it is confidential and is only shared with staff on a need-to-know basis.

Parent/Guardian Signature

Date

THE PARTNERSHIP AGREEMENT

Fort Collins Montessori School is a family-centered learning community. We take seriously our commitment to serve not only children enrolled in the School, but the entire family.

Children thrive when home and school work in harmony, with both environments sharing the same educational values and expectations. Choosing to attend Fort Collins Montessori School means agreeing to a set of expectations related to the School's mission (below), operating principles and policies.

The mission of Fort Collins Montessori School is to provide a high quality, classic Pre/K-9th Montessori school that will inspire and empower children to develop fully their academic and personal potential through the implementation of the methods and philosophy of Dr. Maria Montessori.

Question: What is the School's most basic expectation of parents?

Answer: We expect you to make continuing efforts to both understand and embrace the Montessori approach and to work in partnership with the School. We believe our most constructive relationship building will begin with families prior to admission. Fort Collins Montessori School expects parents to understand and embrace the mission of the school. To that end, we help parents learn about the Montessori approach by providing information and opportunities for parent education as part of the admission process—so that parents can make an informed decision in choosing to enroll their children—and continue to provide more opportunities throughout a family's years at the School. Once children are enrolled, the School expects parents to attend regularly scheduled parent-teacher conferences and parent education events and to familiarize themselves with the philosophy, policies and procedures contained in the Fort Collins Montessori School Parent Handbook and other School publications.

Question: What contribution can I make to create a positive School community?

Answer: You can demonstrate respect for all adults and children, the School and the School's programs. Be a role model for your children. Show respect for them, their classmates, parents of classmates, teachers and other School staff—in short, for everyone associated with the School. Respect begins with civility and deepens into trust. Our most fundamental behavioral guidelines for the children are "Respect yourself, respect others and respect the environment." We expect the same from adults, parents and School staff, at all times and in all relationships within the School community. This includes speech and outward behavior. Support your child by speaking of her/his teachers, classmates and School in positive terms. Respect and abide by the School's policies and procedures. Honor your commitments. Look for ways to make a positive contribution to the life of the School. Through your behavior you contribute to your children's moral development and to the culture and climate of their School, which they experience on a daily basis.

Question: How can I create consistency between home and School?

Answer: You can strive to parent according to Montessori principles. Learn as much as you can about Montessori principles as they apply to preparation of your child's home environment, as well as the way you, as a parent, interact with your children. This begins with the general principle: "Never do something for your child that s/he is ready to do for her/himself." Allow your child to engage in all of the simple tasks of practical life that a child can do for him or herself at each stage of development. Montessori education may also entail learning a communication style different from the way in which you were parented. Children develop a love of learning and become responsible, independent and capable when parents' values and expectations are consistent with those of the School.

Question: What are my responsibilities regarding communication between home and School?**Answer:**

We expect you to maintain an active, direct and respectful two-way communication with the School. Read communications that are sent home: these may include letters, newsletters and calendars. Inform the School in a timely fashion of pertinent changes in your child's life. Active communication involves parents sharing observations and concerns about their child with the child's current teacher. In matters large and small, remember the principle of respect: even when there is disagreement, disagree respectfully.

Question: What can I expect of the School academically?

Answer: Fort Collins Montessori School aspires to fulfill its mission as a Montessori school. As a Montessori school, we are different from traditional schools. Our first commitment is to the multi-dimensional development of your child. Montessori children do amass a great deal of factual knowledge in school. However, our goal is for each child to be far more than a repository of this information: we guide each child to think for him/herself. Cognitive development and a solid academic foundation are essential elements at our school, with the academic foundation being standards based. This said, cognitive development and a solid academic foundation represent but two of several dimensions of our aspirations for your child; equally significant is your child's social, emotional and physical development. At FCMS, children will be given choices and a great deal of freedom—within limits—during the school day. The choices a child makes and the accompanying responsibilities, influence the emerging character of your child. By choosing his/her own work or shaping it to a considerable degree and following that work through to completion while working independently or in cooperation with others, a child at FCMS will identify her/his interests and develop his/her individual gifts. Significant emphasis is placed upon community service. Younger children learn by serving their small community, e.g., classmates, classroom and family. As they grow, children reach out to the larger community and experience the many rewards of helping others. The children gain awareness and appreciation of others, of the challenges faced by others and, equally important, of their own strengths and abilities to help others and affect the world around them. Community service is an integral and important part of their lives and stays with them well beyond their Fort Collins Montessori School years. We will treat each child with dignity and respect and expect that s/he will treat all others in the same manner. We will treat each child as an individual and strive to develop each child's unique gifts—within the context of the classroom and the community. With freedom comes responsibility and each child will learn to be supportive as well as aesthetically beautiful. Dr. Montessori said that the classroom teacher's first responsibility is to prepare the environment. The learning materials should correspond to the developmental characteristics of the child at each level and those materials must be attractive to the child: correct in size, aesthetically pleasing, well maintained and complete. More broadly, the whole environment must appeal to the child and inspire his/her work. Our community of children and adults comprises a social environment and culture that impacts your child's experience. We will strive to make this environment emotionally supportive and safe for every child. This does not mean that there will be no problems. It does mean that we will work with your child in developmentally appropriate ways to deal with problems as they arise, empowering him/her with social skills and aiding him/her in the development of emotional intelligence to prepare for a lifetime of working with others in different communities and organizations.

Question: What professional standards can I expect of the School and faculty?

Answer: Fort Collins Montessori School aspires to maintain the highest pedagogical standards of Montessori practice. At a minimum, all lead teachers will hold a bachelor's degree; a number have earned master's degrees as well. In addition, Primary and Elementary teachers will have a post-graduate diploma from an accredited Montessori teacher training center and will be or will become "Highly Qualified" according to the guidelines of the No Child Left Behind Legislation and the Colorado Charter School Grants Program. Our teachers will have a sense of mission in working with children and demonstrate high standards for themselves and their students. The School promotes a culture of professional growth in a number of ways. Teachers will work annually with the Head of School to create a Professional Growth Plan driven by goal-setting for professional development. Over a three-year cycle, Montessori school consultants will observe each teacher and work with the School as a whole to maintain the highest standards of Montessori pedagogy. In addition, the School annually will host workshops for professional development of faculty, administration and board. Our school will also seek Montessori accreditation within the first 5 years of opening.

Question: What can I expect of the School administration?

Answer: Integrity, a focus on the needs of the individual child in harmony with the life of the community, mission-driven decisions embodying good stewardship and responsible management and an open door to your questions or concerns. Administrative team members interface with all the various constituencies of the School: students, parents, extended family, faculty, alumni, prospective parents, professional visitors, government officials, other schools and educational organizations and the general public. In your interactions with the administration, you can expect professional, courteous and business-like conduct, as well as mutually respectful communication. The Head of School will work closely with the Board of Fort Collins Montessori School and leadership within Poudre School District. Our Head of School may often face decisions requiring a balance of competing priorities. Sometimes those factors are mutually exclusive; sometimes equally well-intentioned adults see matters differently. In making decisions, our administration will focus on the interest of the individual child in balance with the needs of the School.

.....

The Parent Agreement Pledge

Parent Name: _____

Parent Name _____

Child's Name: _____

As a prospective Fort Collins Montessori School Parent, I have read and understand the principles and policies described above. To the best of my ability, I will abide by these expectations through my words and actions. Specifically, I agree to (please initial each item below):

- ☐ Attend all Parent-Teacher Conferences.
- ☐ Attend at least four additional FCMS Parent Information and Open Houses during the academic year.
- ☐ Ensure that my child attends school every day and arrives on time.
- ☐ Create a home environment that supports my child's development through:
 - a. Establishing and maintaining regular routines.
 - b. Providing work/play and sleeping spaces that are orderly.
 - c. Whenever possible allowing my child to practice self-care and independence.
 - d. For all children and particularly Preschool and Kindergarteners, we suggest limiting screen time (television, computers, hand-held devices) to two to four hours per week.
- ☐ Share information pertinent to your child's well being (lifestyle changes, special needs, or other pertinent information) with Fort Collins Montessori School staff.

Signature of Parent: _____ **Date:** _____

Signature of Parent: _____ **Date:** _____