



*To honor each child's individuality, creativity, and intellectual potential through an enriched Montessori education program.*

## APPLICANT INFORMATION

Name \_\_\_\_\_ Gender \_\_\_\_\_

Address \_\_\_\_\_ Present Grade \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Applying for Year \_\_\_\_\_

Date of Birth \_\_\_\_\_ Home Phone \_\_\_\_\_

Ethnicity:    \_\_\_Asian American            \_\_\_American Indian    \_\_\_African American  
              \_\_\_Latino/Hispanic    \_\_\_Caucasian    \_\_\_Mixed Race            \_\_\_Other \_\_\_\_\_

Applying for Program:     Toddler             Preschool             Elementary

## FAMILY INFORMATION

Parent \_\_\_\_\_ Parent \_\_\_\_\_  
Married \_\_\_ Partners \_\_\_ Divorced \_\_\_ Separated \_\_\_ Single \_\_\_ Widowed \_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Email \_\_\_\_\_ Email \_\_\_\_\_

Cell Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Occupation \_\_\_\_\_ Occupation \_\_\_\_\_

Employer \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_ Business Address \_\_\_\_\_

\_\_\_\_\_

Business Telephone \_\_\_\_\_ Business Telephone \_\_\_\_\_

Schools/Colleges Attended \_\_\_\_\_ Schools/Colleges Attended \_\_\_\_\_

\_\_\_\_\_

Grandparent \_\_\_\_\_ Grandparent \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

Present School \_\_\_\_\_ Telephone Number \_\_\_\_\_

Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

Please list all schools previously attended:

\_\_\_\_\_  
(School) (Address) (Year/Grade)

Please list names, schools and ages of siblings:

\_\_\_\_\_  
(Name) (School) (Age)

\_\_\_\_\_  
(Name) (School) (Age)

Has the parent/applicant visited BMFS while in session? \_\_\_\_\_  
If not, please call to schedule a visit. (If yes, please give date)

Please list special interests/hobbies of the applicant:

\_\_\_\_\_

Please list special interests/hobbies of the parents:

\_\_\_\_\_

References: Please list two people who you feel best know the strengths, personality and learning style of your child; we will be writing them for references.

\_\_\_\_\_  
(Name) (Relationship) (Address) (Telephone)

\_\_\_\_\_  
(Name) (Relationship) (Address) (Telephone)

How did you first hear about BMFS? \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Please mail this completed application to: Brixham Montessori Friends School  
18 Brickyard Court  
York, ME 03909

**Please include a non-refundable application fee of \$50.00**

**Brixham Montessori Friends School  
18 Brickyard Court  
York, ME 03909  
(207) 351-2700**

RELEASE FORM

Name of Student \_\_\_\_\_ Grade \_\_\_\_\_

I, \_\_\_\_\_ grant permission to  
(signature of parent)

\_\_\_\_\_  
(Name of School) (Address)

\_\_\_\_\_  
(City, State) (Zip)

to forward a copy of the following records concerning \_\_\_\_\_  
(Student Name)

to: **Brixham Montessori Friends School  
18 Brickyard Court  
York, ME 03909**

COPIES OF RECORDS

This release is for admission purposes. Please send copies of grades (including this year to date) and any recent standardized testing and any quarter and mid-term testing. Please include any diagnostic educational and psychological testing completed in the last three years.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

This request is in compliance with Public Law 93-380 where school officials are requested to treat all information with strict confidentiality.

Brixham Montessori Friends School is a not-for-profit corporation and admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. Brixham Montessori Friends School does not discriminate on the basis of race in administration of its educational policies, admissions policies, scholarship and loan programs, athletic and other school-administered programs.

**Please complete the essay on the back page.**

**Brixham Montessori Friends School  
18 Brickyard Court  
York, ME 03909  
(207) 351-2700**

Please use this page to write a short essay explaining your reasons for applying to BMFS and any goals you have for your child.