

## ADMISSIONS PROCEDURE

1. Schedule a parent tour/classroom observation at either campus: **EARLY CHILDHOOD CAMPUS:** (510) 848-2322 **ELEMENTARY / MIDDLE SCHOOL CAMPUS:** (510) 236-8802.
2. Attend our next Information Session (refer to the Information Session schedule).
3. Complete the application and submit it with a fee of \$60.00 and a small clear photo of your child.
4. Send the Teacher Recommendation Form to your child's current teacher.
5. Please have all the forms completed and sent to the office by **JANUARY 30, 2010**. After the form(s) have been completed and returned to our office, the admissions director will contact you to set up a student visit.
6. **FINANCIAL AID.** Complete a Parent Financial Statement (PFS) by going to: [www.nais.org/go/sss](http://www.nais.org/go/sss). Be sure to include our school code **2529** when completing the application. All financial aid paperwork must be completed on line on the SSS web site by: **JANUARY 30, 2010**. Additional documentation will be required by **FEBRUARY 15, 2010**.
7. Decision letters for applicants 4 years and younger will be mailed until enrollment is full.
8. Decision letters for applicants applying to our K-8 programs (ages 5-14) are mailed on **THURSDAY, MARCH 11, 2010**. Contracts are due back no later than **12:00 P.M.** on **FRIDAY, MARCH 19, 2010**.

### ADMISSIONS CHECKLIST:

- Parent tour/classroom observation
- Attend an Information Session
- Application form / \$60.00 fee / child photo submitted to MFS
- Teacher Recommendation Form sent to current teacher and returned to MFS
- All forms completed and returned to office by **JANUARY 30, 2010**
- Student classroom visit
- Financial Aid: Application completed by **JANUARY 30, 2010**  
Additional documentation submitted by **FEBRUARY 15, 2010**
- Upon acceptance, return contract by **12:00 P.M.** on **MARCH 19, 2010** (K-8 students only)

**Please Note:** Student cannot be considered for admission until his/her admissions file is complete.

## TUITION AND OTHER EXPENSES

### TUITION

*Tuition revenue is essential in maintaining MFS's Academic program and funding the day-to-day operations. These costs are evaluated yearly by the Board of Directors and set in February preceding each academic year. Tuition for the 2009-2010 school year is:*

#### **PRESCHOOL PROGRAM (3 - 6 years)**

9:00 am - 12:30 pm	\$12,975 annual
9:00 am - 3:00 pm	\$14,950 annual

#### **KINDERGARTEN TRANSITION PROGRAM (4 - 6 years)**

9:00 am - 3:00 pm	\$15,000 annual
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#### **LOWER ELEMENTARY PROGRAM (6 - 9 years)**

9:00 am - 3:00 pm	\$16,000 annual
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#### **UPPER ELEMENTARY PROGRAM (9 - 12 years)**

8:40 am - 3:00 pm	\$17,000 annual
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#### **MIDDLE SCHOOL PROGRAM (12 - 14 years)**

9:00 am - 4:00 pm	\$18,000 annual
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### EXTENDED CARE

*Before and after school care is provided from 8-6 pm. You can purchase an extended care program or use the before and after school program on a drop-in basis.*

Extended Care Contract	\$2,500 annual
After School Program—Drop in Rate ( <i>both campuses</i> )	\$8.50 per hour
Before School ( <i>Early Childhood Campus</i> )	\$8.50 per hour
Before School ( <i>Elementary and M.S. Campus</i> )	\$5.00 between 8:00-8:30 am

### BEYOND TUITION

Materials/Activities Fees <i>Preschool &amp; Kindergarten Transition (KT1 &amp; KT2)</i>	\$275 due June 1st
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*(over, please)*

Materials/Activities Fees <i>Elementary (LE &amp; UE)</i>	\$325 due June 1st
Materials/Activities Fees <i>Middle School</i>	\$400 due June 1st
Building/Insurance Fees ( <i>per family</i> )	\$230 due November 1st
Shuttle ( <i>optional</i> )	\$120 per month for 10 months
Emergency Supplies	\$60 ( <i>one time fee</i> )

### **THE ANNUAL FUND**

*Each fall, MFS families are asked to make a tax-deductible, unrestricted contribution to the MFS Annual Fund. These donations are used to raise money for the MFS current operating expenses, and to make up the difference between the price of tuition and the actual cost of a MFS education. We hope for 100 percent participation by our families each year and we hope that they give at a level that is comfortable.*

### **PARENT INVOLVEMENT**

*At MFS we expect parents to get involved in the school community by donating 20 hours of their time per year to their child's education while attending MFS.*



**OTHER SCHOOL(S) ATTENDED BY APPLICANT: (INCLUDING CURRENT SCHOOL)**

Name	Address	Program or Grade(s) / Date(s)
_____	_____	_____
_____	_____	_____

**PRESCHOOL APPLICANTS ONLY**

Does your child function best in a structured or unstructured environment? \_\_\_\_\_

Is your child toilet trained?  Yes  No

What are you doing regarding toilet training? \_\_\_\_\_

Nap?  Yes  No Usual nap length? \_\_\_\_\_

**FINANCIAL AID INFORMATION**

A portion of the school's budget is dedicated to Financial Aid. Scholarships are based on financial need and awarded in a process separate from the application for admission. Please indicate below if you wish to apply.

Who is financially responsible for this applicant? \_\_\_\_\_

Do you intend to seek Financial Aid assistance?  Yes  No

**OTHER INFORMATION**

Name of relatives or friends who have attended MFS \_\_\_\_\_

How did you hear about MFS?  Newspaper  Berkeley Parent Network  MFS Web Site  Word of Mouth  
 MFS Parent/Staff  Internet Search  Other (please explain) \_\_\_\_\_

PLEASE RETURN THIS APPLICATION AND YOUR NON-REFUNDABLE \$60.00 APPLICATION FEE CHECKS MADE PAYABLE TO MONTESSORI FAMILY SCHOOL

Parent/Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_

*Montessori Family School admits students and employs faculty and staff without regard to race, color, religion or national origin. Montessori Family School considers the records of all students to be confidential information available to students, parent or guardian upon request. Records will be released to schools or other agencies only with the written permission of the parent or guardian.*

**OFFICE USE ONLY:**

Date Applied \_\_\_\_\_ Fee Received \_\_\_\_\_ Check# \_\_\_\_\_

Student Visit Date/Time \_\_\_\_\_ Class \_\_\_\_\_

Enrollment Packet Completed on \_\_\_\_\_

Required Second Visit Date/Time \_\_\_\_\_

Accepted  WL  Not Accepted

**2009-2010 SCHOOL CALENDAR**

Sept. 8	<b>First Day of School</b>
Oct. 12	<b>Indigenous People's Day</b>
Oct. 16	<b>Family Spaghetti Dinner</b>
Oct. 22	<b>Elementary Overview w/Head of School</b>
Nov. 12	<b>Middle School Overview</b>
Nov. 12-13	<b>All School Conferences</b>
Nov. 25	<b>Grandparents/Special Friend's Day</b>
Nov. 26-27	<b>Thanksgiving Holiday</b>
Dec. 18	<b>Winter Music Performance</b>
Dec. 21- Jan.1	<b>Winter Break</b>
Jan. 18	<b>MLK Holiday</b>
Jan 21	<b>Curriculum Night</b>
Jan. 29	<b>Ladies Night Out</b>
Feb. 5	<b>Family Bingo Night</b>
Feb. 15-17	<b>President's Holiday</b>
Feb. 18-19	<b>All School Conferences</b>
Feb. 26	<b>Dad's Poker Night</b>
Mar. 13	<b>Spring Soiree Auction</b>
Mar. 29-Apr.2	<b>Spring Break</b>
Apr. 16	<b>Spring Family Dance</b>
Apr. 23	<b>Earth Day Celebration</b>
Apr. 28-29	<b>Upper Elementary Drama Production</b>
May 7	<b>Silly Hat and Crazy Hair Day</b>
May 21	<b>Pajama Day</b>
May 21	<b>Movie Night</b>
May 22	<b>Alumni Reunion</b>
May 26-28	<b>Elementary School Camping Trip</b>
May 29-31	<b>Memorial Day Weekend</b>
Jun 4	<b>Spring Music Performance</b>
Jun 11	<b>Last Day of School</b>

## PARENT QUESTIONNAIRE

*At MFS we believe each individual has unique characteristics and can offer their diverse talents to our community. Please help us to get to know your child by filling out this questionnaire.*

1. Why are you applying to MFS and if your child is transferring from another school, please let us know the reason for your transfer.
2. Why do you think MFS could be a good match for your child and your family? What draws you to our philosophy? Has your family had any experience with either Montessori or other progressive education programs?
3. Please comment on your child's greatest strengths and challenges as both a student and a person.
4. Does your child have any responsibilities at home? Please explain.
5. In what ways do you hope to become involved in the MFS community? Do you have particular skills or talents (web design, gardening, fundraising, etc.) that you would be willing to share?

6. Please share any information that will help us better know your child; this might include health, learning differences, tutoring, accelerated programs, family circumstances.

Parent signature \_\_\_\_\_ Date: \_\_\_\_\_

## CONFIDENTIAL TEACHER RECOMMENDATION FORM FOR PRESCHOOL

*Give this form to your child's current or former teacher. If your child is not currently in a preschool, the child's day care provider or nanny can complete this form.*

Child's Name \_\_\_\_\_ Child's D.O.B. \_\_\_\_\_

Name of Parent or Guardian \_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_

Phone Number \_\_\_\_\_ Date \_\_\_\_\_

**TO THE PRESCHOOL TEACHER, DAY CARE PROVIDER OR NANNY:**

*Please complete the form and return it **directly** to: Montessori Family School, 1850 Scenic Ave., Berkeley, CA 94709. The information will remain confidential and will not become part of the student's permanent record. Thanks in advance for your time.*

What are the child's previous group experiences with siblings, playgroups or in a school setting?

Describe the child's gross/fine motor skills.

Does the child work independently?

Describe the child's ability to focus on a task.

How does the child handle transitions?

Do you have any plans for helping the child transition from home to school independently?

How are limits set and how does the child respond?

Describe the child's temperament. What are the child's favorite activities?

Describe the most important milestone that the child has achieved in the last 6 months?

How many hours does he/she sleep in a 24-hour period? When? Napper?

What are the child's eating habits?

How does the child express his/her needs and feelings?

Is the child toilet trained? Does the child use the toilet independently? If no, what are you doing regarding toilet training?

What languages are spoken in the home?

Is there any additional information that you would like the Montessori Family School to know about the child? yes / no If yes, please write below.

When did you know the child? Dates: from \_\_\_\_\_ to \_\_\_\_\_

Can we contact you by phone? \_\_\_\_\_ If yes, please include a daytime number:

\_\_\_\_\_

Name and title of the person completing the form:

\_\_\_\_\_

Name/Address of the school or day care (*if applicable*)

\_\_\_\_\_