



Applying for school year: Fall Spring 20\_\_-20\_\_

# Student Application

1423 Julia Street Fernandina Beach, FL 32034 904.261.6610  
ameliaislandmontessori.com

<input type="radio"/> Toddler Half Day (8:30 am – 12:00 pm)	<input type="radio"/> Kindergarten (8:30 am – 3:00 pm)
<input type="radio"/> Toddler Full Day (8:30 am – 3:00 pm)	<input type="radio"/> Lower Elementary 1 2 3 (8:30 am – 3:00 pm)
<input type="radio"/> Primary Half Day (8:30 am – 12:00 pm)	<input type="radio"/> Upper Elementary 4 5 6 (8:30 am – 3:00 pm)
<input type="radio"/> Primary Full Day (8:30 am – 3:00 pm)	<input type="radio"/> Middle School 7 8 (8:30 am – 3:00 pm)

Will you be needing before-school (7:30 am – 8:30 am) or after-school (3:00pm – 6:00pm) care?

Yes: Before

Yes: After

## CHILD'S INFORMATION

_____		_____		_____	
Child's Last Name	First Name	Middle Name			
_____		_____	_____		
Preferred Name		Sex	Date of Birth		
_____		_____	_____		
Home Phone		Cell phone			
_____		_____			
Parent/Guardian Email		Parent/Guardian Email			
_____		_____			
Street Address		_____			
_____		_____			
City		State	Zip code		
_____		_____	_____		
Previous/Present School		Dates attended			
_____		_____			

Reason for changing schools

Is the applicant related to alumni of Amelia Island Montessori School?  Yes  No

## 1<sup>st</sup> PARENT/GUARDIAN INFORMATION

_____		_____		_____	
Last Name		First Name		Relationship to applicant	
_____		_____		_____	
Address	<input type="checkbox"/> Check here if the same as applicant	City	State	Zip code	
_____	_____	_____	_____	_____	
Employer/Occupation			Business Phone		
_____			_____		

**OVER**

