



**HILLTOP**  
MONTESSORI SCHOOL

6 Abbott Square / Birmingham, AL 35242 / (205)437-9343 / hms@hilltopmontessori.com /www.hilltopmontessori.com

*Our mission is to light the flame of learning to achieve a lifetime of success.*

**APPLICATION FOR ADMISSION**

CHILD'S NAME: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE) (PREFERRED)

DATE OF BIRTH: \_\_\_/\_\_\_/\_\_\_ MALE FEMALE REQUESTED START DATE: \_\_\_/\_\_\_ (MONTH / YEAR)

HOME ADDRESS: \_\_\_\_\_  
(STREET) (CITY) (STATE) (ZIP)

PRIMARY PHONE: \_\_\_\_\_ PRIMARY EMAIL: \_\_\_\_\_

IS THERE ANY LANGUAGE OTHER THAN ENGLISH SPOKEN IN THE HOME, AND TO WHAT EXTENT? \_\_\_\_\_

**PARENT / GUARDIAN INFORMATION**

RELATION TO CHILD: \_\_\_\_\_

RELATION TO CHILD: \_\_\_\_\_

\_\_\_\_\_  
(FIRST) (LAST)

\_\_\_\_\_  
(FIRST) (LAST)

ADDRESS: \_\_\_\_\_  
(IF DIFFERENT FROM CHILD)

ADDRESS: \_\_\_\_\_  
(IF DIFFERENT FROM CHILD)

\_\_\_\_\_  
(CITY) (STATE) (ZIP)

\_\_\_\_\_  
(CITY) (STATE) (ZIP)

PRIMARY PHONE: \_\_\_\_\_

PRIMARY PHONE: \_\_\_\_\_

SECONDARY PHONE: \_\_\_\_\_

SECONDARY PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

EMAIL: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_

POSITION / OCCUPATION: \_\_\_\_\_

POSITION / OCCUPATION: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_

SPECIAL INTEREST/EXPERTISE: \_\_\_\_\_

SPECIAL INTEREST/EXPERTISE: \_\_\_\_\_

STUDENT LIVES WITH (Circle all that apply):

|                |                         |
|----------------|-------------------------|
| Father         | Mother                  |
| Fathers        | Mothers                 |
| Stepfather     | Stepmother              |
| Grandparent(s) | Guardian/Other Relative |

(Circle all that apply)

|                      |                   |                  |
|----------------------|-------------------|------------------|
| Student adopted      | Mother remarried  | Custodial Mother |
| Adoption in Progress | Father remarried  | Custodial Father |
| Mother Deceased      | Parents separated | Joint Custody    |
| Father Deceased      | Parents divorced  | Single Parent    |

## SIBLING INFORMATION

| NAME  | AGE   | GRADE | PRESENT SCHOOL |
|-------|-------|-------|----------------|
| _____ | _____ | _____ | _____          |
| _____ | _____ | _____ | _____          |

\*Siblings of current HMS students will be considered for enrollment priority.

## PROGRAM REQUESTED

CHILD'S AGE AT START DATE: \_\_\_\_\_ / \_\_\_\_\_ (YEARS / MONTH)

CHOOSE PROGRAM DESIRED:

**TODDLER** (18 mth - 3 yr) Programs: Morning (3 & 5 days) / Full day (3 & 5 days )

MORNING-8:30 to 12:00

\_\_\_\_\_ Monday, Tuesday, Wednesday  
3-Morning

\_\_\_\_\_ Monday – Friday  
5-Morning

FULL DAY-8:30 to 3:15 (2:15 Friday)

\_\_\_\_\_ Monday, Tuesday, Wednesday  
3-Full Day

\_\_\_\_\_ Monday – Friday  
5-Full Day

### **PRESCHOOL**

\_\_\_\_\_ Half Day Preschool-8:30 to 12:00    \_\_\_\_\_ Lunch Bunch-12:00 to 1:00    \_\_\_\_\_ Full Day Preschool-8:30 to 3:15 (2:15 Friday)

**KINDERGARTEN** –8:30-3:15 (2:15 Friday)

\_\_\_\_\_ Full Day Kindergarten

**LOWER ELEMENTARY SCHOOL**–8:30-3:15 (2:15 Friday)

\_\_\_\_\_ Grade 1

\_\_\_\_\_ Grade 2

\_\_\_\_\_ Grade 3

**UPPER ELEMENTARY SCHOOL**–8:30-3:15 (2:15 Friday)

\_\_\_\_\_ Grade 4

\_\_\_\_\_ Grade 5

\_\_\_\_\_ Grade 6

**MIDDLE SCHOOL**–8:30-3:15 (2:15 Friday)

\_\_\_\_\_ Grade 7

\_\_\_\_\_ Grade 8

### **ADDITIONAL OPTIONS (check if needed routinely)**

\_\_\_\_\_ Early Care (7:00 AM – 8:30 AM)

\_\_\_\_\_ Early Drop-Off (8:00 AM – 8:30 AM)

\_\_\_\_\_ After Care (3:45 PM – 5:30 PM)  
(2:45 PM – 5:30 PM on Fridays)  
*Available for Kindergarten-8<sup>th</sup> grade only*

\_\_\_\_\_ Late Pick-Up (3:15 PM – 3:45 PM)  
(2:15 PM – 2:45 PM on Fridays)  
*Available for Kindergarten-8<sup>th</sup> grade only*

**Note to Working Parents:** Hilltop offers early care services as early as 7:00 a.m. for all students and aftercare services until 5:30 p.m. for children in K-8th grade. We also have two faculty members that offer babysitting after school for children under the age of kindergarten until 6:00 p.m.

## SCHOOL / ACADEMIC INFORMATION

Please list all daycare(s)/school(s) attended by your child for the past three years, including the current year. Children who are transferring from another Montessori program and siblings of current students will be considered for enrollment priority.

| NAME OF SCHOOL | CITY / PHONE | YEAR(S) ATTENDED | GRADE(S) | TEACHER |
|----------------|--------------|------------------|----------|---------|
|                |              |                  |          |         |
|                |              |                  |          |         |
|                |              |                  |          |         |

TEACHER INFORMATION FORMS WILL BE FILLED OUT BY (Include teacher name / name of school):

|                                     |  |  |
|-------------------------------------|--|--|
| GRADES PRE K—5: Current Teacher     |  |  |
| GRADES 6—8: Current English Teacher |  |  |
| GRADES 6—8: Current Math Teacher    |  |  |

All teacher information forms are confidential and should be mailed directly to Hilltop Montessori School by the teachers completing the forms.

## PARENT QUESTIONNAIRE

DESCRIBE YOUR CHILD'S STRENGTHS, CHALLENGES, AND LEARNING STYLE:

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WHAT ARE YOUR GOALS FOR YOUR CHILD AT HILLTOP MONTESSORI SCHOOL?:

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WERE YOU DISSATISFIED WITH YOUR CHILD'S PREVIOUS SCHOOL EXPERIENCE? PLEASE EXPLAIN:

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HAS YOUR CHILD EVER BEEN DISMISSED OR EXPELLED FROM A PREVIOUS SCHOOL? IF SO, PLEASE EXPLAIN:

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DOES YOUR CHILD HAVE CHARACTERISTICS WHERE SPECIAL ACCOMMODATIONS MAY BE APPROPRIATE (DIETARY NEEDS, FOOD ALLERGIES, BEHAVIORAL CONCERNS, HEALTH / PHYSICAL LIMITATIONS OR LEARNING DIFFERENCES)? ARE THERE AREAS WHERE YOUR CHILD MAY HAVE EXCEPTIONAL STRENGTHS, CHALLENGES OR DELAYS? PLEASE ELABORATE:

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HAS YOUR CHILD EVER RECEIVED OR BEEN RECOMMENDED FOR PSYCHOLOGICAL OR EDUCATIONAL TESTING? PLEASE EXPLAIN TESTING DATES AND NAMES OF SPECIALISTS WHO CONDUCTED THE TESTING:

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ADDITIONAL INFORMATION AND OBSERVATIONS ABOUT YOUR CHILD WHICH MIGHT HELP US GET TO KNOW HIM / HER BETTER. SPECIAL INTERESTS / ABILITIES, AWARDS / ACHIEVEMENTS, SOCIAL RELATIONS WITH SIBLINGS / OTHER CHILDREN OR HOW THEY HANDLE TRANSITIONS / NEW SITUATIONS, ETC.:

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DO YOU WISH TO BE CONSIDERED FOR NEED-BASED FINANCIAL AID?      YES      NO

Families interested in being considered for financial aid should contact the School Office to learn about deadlines and application procedures. Financial aid is granted on an annual basis prior to the upcoming academic school year.

I CERTIFY THAT ALL THE INFORMATION I HAVE PROVIDED IN THIS APPLICATION IS ACCURATE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

\*PLEASE ATTACH A \$100 NON-REFUNDABLE APPLICATION PROCESSING FEE THAT INCLUDES THE OBSERVATION AND EVALUATION OF YOUR CHILD IN THE MONTESSORI ENVIRONMENT.

I HEARD ABOUT HILLTOP MONTESSORI SCHOOL THROUGH:

Print Ad      Social Media      HMS Parent      Website      Other \_\_\_\_\_

*In our commitment to embrace diversity, Hilltop's enrollment is open to all children and their families without regard to race, color, religion, creed, gender, sexual orientation, disability or national origin. Hilltop is also non-denominational and works toward the goal of having each child celebrated for their own unique traditions, culture and religion.*