



## HOW TO APPLY TO CASA DI MIR MONTESSORI SCHOOL – 2020/21

### ABOUT APPLYING FOR ELEMENTARY

We are pleased that you have chosen to apply to Casa di Mir Montessori School. The Admissions Committee evaluates children based on the application, current teacher evaluations, and observations during the child's visit.

Casa di Mir values a diverse community and does not discriminate on the basis of race, color, national or ethnic origin, sex or religious affiliation. Casa di Mir reserves the right to select students based on educational compatibility with the Montessori program.

Our goal in admissions is to find a good match between child, family, and school. Casa di Mir welcomes applications from all families.

### DEADLINE

For priority consideration, please submit all application materials by February 7, 2020.

### IMPORTANT DATES

#### Open House

Sunday, January 26<sup>th</sup> from 2:00 – 4:00pm

#### Prospective 1<sup>st</sup> Grade Student Assessment Day

Friday, February 28<sup>th</sup>

(Completed application packet required)

*Late applicants will be scheduled individually if space is available. Prospective 1<sup>st</sup> graders may be asked to attend a shadow day in addition to the scheduled assessment day.*

#### Shadow Days:

All 2<sup>nd</sup> through 8<sup>th</sup> grade applicants are required to attend 2 shadow days

(Completed application packet required)

### CONTACT INFORMATION

Please contact our Director of Admissions at (408) 370-3073 or [admissions@casadimir.org](mailto:admissions@casadimir.org).

### APPLICATION CHECKLIST

#### VISIT THE SCHOOL

Individual tours are available Monday to Friday by appointment only. Please call or email the Director of Admissions to schedule a tour.

#### ATTEND OUR OPEN HOUSE

The Open House is the best opportunity to meet faculty and our Board of Directors, tour the campus, and receive details on the admissions process and financial aid.

#### SUBMIT A COMPLETED APPLICATION PACKET

Applications (including the non-refundable, \$100 application fee) received by Feb. 7, 2020 will be given priority consideration. As part of their application, 6<sup>th</sup>/7<sup>th</sup>/8<sup>th</sup> graders respond to a question in writing. All forms are available from the school office or online at [www.casadimir.org](http://www.casadimir.org).

#### SUBMIT A COMPLETED TEACHER EVALUATION FORM

Please have your child's current teacher complete and return the Teacher Evaluation Form directly to Casa di Mir. All forms must be received before your child will be scheduled for a visit.

#### APPLICANTS ATTEND ASSESSMENT OR SHADOW DAYS

All visits are scheduled through the Admissions Office.

#### FAMILY CONVERSATION (REQUIRED FOR ELEM. & MIDDLE SCHOOL)

Family conversations are scheduled through the Admissions Office.

#### FINANCIAL AID

If you are interested in financial aid, please request a packet from the Director of Finance.



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## APPLICATION FOR ELEMENTARY ADMISSION 2020-21

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Please check one:  1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup> OR  4<sup>th</sup>  5<sup>th</sup>  6<sup>th</sup>

Child's Full Name \_\_\_\_\_

Boy  Girl Date of Birth \_\_\_\_\_

Address \_\_\_\_\_  
Street City Zip

Child lives with  Both Parents  Other/Specify: \_\_\_\_\_

First Parent \_\_\_\_\_ Second Parent \_\_\_\_\_

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

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

Phone \_\_\_\_\_ Phone \_\_\_\_\_

E-mail \_\_\_\_\_ E-mail \_\_\_\_\_

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

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

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

Child's Current School \_\_\_\_\_ Grade Level \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Previous Schools Attended: \_\_\_\_\_

Siblings, names and ages \_\_\_\_\_

I (we) affirm that the information provided in this application is true and correct to the best of my (our) knowledge.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**BOTH PARENT SIGNATURES REQUIRED**



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## ELEMENTARY PARENT QUESTIONNAIRE 2020-21

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Please answer the following questions as thoroughly as possible. Please use a separate sheet of paper if more space is needed.

1. How did you learn about Casa di Mir? (please check all that apply)

- Current school / teacher
- Word of mouth
- Internet
- Friend (name) \_\_\_\_\_
- Other sources (name) \_\_\_\_\_
- Publication (name) \_\_\_\_\_

2. Why do you want your child to attend Casa di Mir?

3. What does Montessori education mean to you?

4. What are your educational goals for your child?

5. Do you intend to keep your child at Casa di Mir through 8<sup>th</sup> grade? If not, through which grade level?

6. What are your child's strengths in school? What are his/her challenges?

7. Where is your child currently enrolled, and why are you seeking a change?

8. Do have any concerns about your child's developmental growth (academic, physical, or social)? No Yes

9. Is your child receiving remediation for any of your concerns? No Yes If yes, please explain:

10. What are your child's interests and activities outside of school?

11. What language is spoken at home? \_\_\_\_\_ Other language(s) spoken: \_\_\_\_\_

**\*FOR MID-YEAR TRANSFER APPLICANTS:** On another sheet, please indicate the reasons you wish to move your child from his/her current school and what you hope our program can offer.

**\*FOR ALL APPLICANTS:** Use the space below, or the reverse side, if there is additional information you wish to share about your child/family.



**\*FOR ALL 6<sup>th</sup>-8<sup>th</sup> GRADE APPLICANTS (to be answered by the prospective student and returned with the application packet):** What do you know about the Upper Elementary and/or Middle School Programs that interests you? Why do you think the program would be a good fit for you?



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## **PARTICIPATION REQUIREMENT ACKNOWLEDGEMENT**

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### **Parent Participation Requirement**

Casa di Mir requires a minimum of 40 service hours per school year. Parent participation enhances our program and contributes immeasurably to the success of our students. Upon acceptance to Casa di Mir, each family is required to sign a Parent Participation Contract. Highlights of the contract are listed below. Please review them and sign at the bottom of this form to acknowledge that you have been informed of this requirement.

### **Participation Hours**

**Participation Hours:** A minimum of 40 hours per family is required. Parents may choose from a variety of opportunities both in the classroom and out. A list of participation opportunities is provided to families upon enrollment.

**School Clean-up Days:** Participation is required at one clean-up day per school year. We typically schedule one clean up day just prior to the beginning of the school year, one in January just prior to the Open House, and one in June just before the end of the school year. Hours worked at clean-up days are counted toward total participation hours.

**Timecards:** Parents are required to track the volunteer hours work. A form for recording participation hours is available in the office or you may keep a record of your hours electronically. A record of the participation hours must be turned into the office no later than June 1.

### **General Participation**

In order to ensure a smooth-running community and to stay abreast of activities, we also require that parents:

- Read and adhere to the policies in the Parent-Student Handbook.
- Attend the New Parent Orientation.
- Read all weekly communications sent home via email and Friday Folder.
- Attend Back to School Nights and other parent meetings.

**I have read the above information and understand that upon acceptance to Casa di Mir Montessori School I will be required to sign a Parent Participation Contract.**

\_\_\_\_\_  
**Parent Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Parent Signature**

\_\_\_\_\_  
**Date**

**BOTH PARENT SIGNATURES REQUIRED**



Casa di Mir  
MONTESSORI SCHOOL

90 East Latimer Avenue, Campbell, CA 95008 Phone: (408) 370-3073

## TEACHER EVALUATION FOR ELEMENTARY APPLICANT 2020-21

### PARENT AUTHORIZATION FOR RELEASE OF INFORMATION

**To the Applicant:** Please sign this form and give it to your child's present teacher, principal or counselor.

I, the undersigned, hereby consent to the release of the information about my child as requested below. I understand that this evaluation will be mailed directly to Casa di Mir and will remain confidential. I also give my permission for any representative of Casa di Mir Montessori School to speak with any faculty or staff member of the school listed below.

**Signature of Parent or Legal Guardian** \_\_\_\_\_ **Date** \_\_\_\_\_

**Student's Full Name:** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_ **Current Grade Level** \_\_\_\_\_

**Name of School** \_\_\_\_\_ **Telephone** \_\_\_\_\_

### REQUEST FOR INFORMATION FROM CURRENT TEACHER

**To the School:** The student named above is an applicant for admission to Casa di Mir. We are requesting a personal and academic evaluation of the child. This information is of primary importance in evaluating the child for admission and will remain confidential. Please have the current teacher complete this form and **return it via MAIL (see below), EMAIL (admissions@casadimir.org) OR FAX (408-370-3153) no later than Feb. 7, 2020.**

**To the Teacher:** We appreciate your candid assessment. This evaluation will remain confidential. Please use an "X" to indicate where this student falls on the scales below. For example, for a child of average height:

Short.....X.....Tall

#### A. ACADEMIC/INTELLECTUAL

Self-initiator	.....	Needs adult direction
Works independently	.....	Needs constant supervision
Learns for self	.....	Learns for outside approval
Sequential approach	.....	Random approach
Concrete thinker	.....	Abstract thinker
Functions in unstructured class	.....	Needs structure
Focuses well	.....	Short attention span

#### B. SOCIAL/BEHAVIOR

Leader	.....	Follower
Makes friends easily	.....	Difficulty with peers
Works best alone	.....	Works best in groups
Adult oriented	.....	Peer oriented
Reflective/Observant	.....	Impulsive
Strong willed	.....	Compliant
Follows directions	.....	Unable to follow directions

1. Please give a general idea of academic skills, name of reading or math programs used, and approximate level of completion.

- Reading
- Writing
- Math



2. Describe the child's strengths and weaknesses.

Strengths:

Weaknesses:

3. Please state any challenges (e.g. short attention span, easily frustrated).

4. Does this child demonstrate an ability to concentrate independently on projects? Is he/she self-motivated? Explain.

5. Has this child been assessed for being gifted, learning disabilities, ADHD, speech/language, social skills?

YES  *Type of Assessment:* \_\_\_\_\_ NO

6. Are there concerns that this child should be considered for such assessment? If so, explain.

7. What special instruction or support does this child receive? (e.g. gifted, learning disabilities, social and emotional challenges)

8. Please comment on this child's attitude and adjustment to school, relationship with peers and cooperation with adults. Are there any specific social challenges with peers or adults?

9. How would you rate this child's ability with the English language? (vocabulary, articulation, etc.)

10. Do you feel there is good teamwork between home and school? YES  NO

11. (*Optional*) On another sheet, please offer any additional information which you feel might help us assess this child.

If you have additional information that you feel would be better conveyed by a telephone conversation, please check here. Thank you.

Best hours to reach me are \_\_\_\_\_ at this phone number \_\_\_\_\_.

Print Name \_\_\_\_\_

Email \_\_\_\_\_

Title \_\_\_\_\_

Telephone \_\_\_\_\_

Signature \_\_\_\_\_