



Montessori Institute

for Teacher Education at Spring Valley

Educating Children and Teachers Since 1951

Madeleine J. Justus
School Founder

Gulsevin Kayihan
Academic Director

Susan Hancock
Finance Director

2017-2018 Application for Montessori Teacher Education Program, MACTE Accredited

Early Childhood Program (ages 2½ - 6) **Tuesdays, 2:30pm – 9pm**

September through June Starting Term _____, 20_____

Name _____ Home Phone _____

Cell Phone # _____ E-mail _____

Address _____ City _____ State _____ Zip _____

Date of Birth _____ Place _____ Citizenship _____

Marital Status _____ Health _____ Number and Ages of Children _____

Person to contact in case of Emergency _____

Place of Employment _____ City _____

Work Phone # _____ Fax #: _____

<u>Education</u>	<u>Date</u>	<u>Major</u>	<u>Degree</u>
High School _____	_____	_____	_____
College _____	_____	_____	_____
Graduate School _____	_____	_____	_____

Experience: (You may add another page or your resume to list more.)

Teaching and Dates: _____

Have you previously attended any Montessori lectures, workshops, etc. and if you have, where and when?

How did you develop an interest in the Montessori Method? _____

Where did you hear about our Program? _____

I understand and agree the tuition for the course is \$ 6,350 (\$ 2,180 quarterly X 3 payments or \$ 730 monthly X 9 payments) which is due and payable by me if my application is accepted by Montessori Institute for Teacher Education at Spring Valley, even if I fail to complete the course for any reason unless specified as in the cancellation and refund policy (WAS 490-600-071).

Enclosed non-refundable registration fee-\$250 (Registration Fee is \$200 if received before June 3, 2017)

Signature _____ Date _____