



Private Pre-school & Public K-8 Charter School in Paradise Valley

Montessori Academy Inc ◇ 6050 N Invergordon Rd ◇ Paradise Valley, AZ 85253 ◇ Voice 480-945-1121 ◇ Fax 480-874-2928

Questionnaire: Elementary and Middle School

To help us get to know your child better, we ask that you please fill out this form and return it with your application.

Student Name: _____ Birth Date: _____

General Information

Primary language spoken at home: _____

Mother's occupation: _____

Mother's place of business: _____

Mother's education (Highest): _____

How many hours per day does Mother work? _____

How often is Mother out of town? _____

Father's occupation: _____

Father's place of business: _____

Father's education (Highest): _____

How many hours per day does Father work? _____

How often is Father out of town? _____

Family and Child Information

Does your child have any siblings? Yes No

| Name | Age | Describe Relationship |
|------|-----|-----------------------|
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Parents Marital Status: _____ With whom does your child live? _____

Parent Visitation Schedule: _____

Health Information

Was your child adopted? Yes No

What illnesses has your child had? (Chronic ear infections, Strep throat, Chickenpox, Measles, etc.)

Number of days ill last year: _____

Is your child taking any daily medication? Yes No

If yes, what kind? _____

Academics

Please list previous schools, dates attended, and grades completed:

| Name of school | Location | Dates | Grades completed |
|----------------|----------|-------|------------------|
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Has your child ever attended a Montessori School before? Yes No

If yes, how long and what grades? _____

What do you like the MOST about the Montessori Environment? _____

What do you like the LEAST about Montessori Environment? _____

Why did you leave your last school? _____

What are your goals for this year? _____

Was your child expected to do homework in the past? Yes No If Yes, how long? Please describe:

Has your child ever been expelled from another school? Yes No

Has your child ever had an IEP or a 504? Yes No

Are you aware that excessive tardiness and absences could lead to retention? Yes No

Have any additional support been provided to your child? (Tutoring, aide, accommodations) Yes No

Likes and Dislikes

What does your child enjoy doing most? _____

What activities does your family enjoy doing together? _____

Does your child have any chores? Yes No If yes, please describe: _____

On average, how many hours of television per week does your child watch? _____

On average, how many hours of computer, video games, and social media does your child engage in per week?

Is your child involved in any extracurricular activities outside of school? Yes No

If yes, please describe: _____

Miscellaneous

What do you consider to be your child's strengths? _____

What do you think your child could use support in doing? _____

Are you aware that the Montessori program is based on a 3-year cycle? Yes No

Are you aware that Montessori Academy requires parents to volunteer a total of 30 hours per year? Yes No

What brought you to Montessori Academy? _____

Are there any other comments that you feel would be helpful? _____
