

Spring Valley Montessori Teacher Education Program

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Application for Montessori Teacher Education Program 2010-2011

Please check: Program I (ages 2 1/2 - 6) _____ Program II (ages 6-12) _____ Starting Term _____, 20____

Name _____ Home Phone: _____ Fax: _____

Work Phone # _____ Cell Phone # _____

Address _____ City _____ State _____ Zip _____

Date of Birth _____ Place _____ E-mail _____

Citizenship _____ Marital Status _____ Health _____

Number and Ages of Children _____

Place of Employment _____ City _____

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

Experience:

Teaching and Dates: _____

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

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 \$5,450 (\$1,875 per quarter or \$640/mo.) which is due and payable by me if my application is accepted by Spring Valley Montessori School, 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 8, 2010)

Signature _____ Date _____