

1211 Parkway Austin TX, 78703 2900 E. Cesar Chavez St Austin, TX 78702 512 - 614 - 0021 www.MiCasitaAustin.com Admin@MiCasitaAustin.com

APPLICATION FOR ADMISSION

Mi Casita Montessori currently maintains a waiting pool, which includes children eligible for both the Toddler and the Primary program. Enrollment takes place annually between December and March of the following school year. Enrollment is prioritized in the following order: returning families and waiting pool students. In an effort to maintain diversity, waiting pool students are considered based on space availability, age, gender, date of application, and ethnicity.

To complete your Application for Admission, please submit the following:

- An Application of Admission for each child you wish to be considered for enrollment
- A one-time, non-refundable \$150 Application Fee per application
- A family photo

You may drop off your application and fee in the office, or submit your application via mail or email at admin@micasitaaustin.com. Your application fee is payable by cash, check, credit card, or through Venmo @Micasita2019 (code 6389) and may be submitted via mail or to the office directly.

CONTACT INFORMATION

Child's Full Name:	Gender: Date of Birth:
Ethnicity: Primary/Seconda	
Do you already have a child in our Waiting Pool? (If yes,	
Have you attended a Parent Tour? ☐ Yes ☐ Not yet	Tour Date:
Primary Mailing Address:	
Home Telephone Number or Primary Contact Number	
Parent/Guardian Name:	Parent/Guardian Name:
Relationship to Child:	Relationship to Child:
Email:	Email:
Call Dhana:	Cell Phone:

In which of the following programs would you likely enroll your child?
 Downtown Campus (1211 Parkway Austin, TX 78703) East Campus (2900 East Cesar Chavez St. Austin, TX 78702)
 Morning 8:30 a.m. – 12:00 p.m Full-Day 8:30 a.m. – 2:30 p.m Early Arrival Program 7:30 a.m. – 8:30 a.m. (optional, for an additional fee) After School Program 2:30 p.m. – 5:30 p.m. (optional, for an additional fee)
Would you be interested in the first available spot? Y or N
Preferred start date: (Month/Year)
How did you hear about Mi Casita Montessori?
ADDITIONAL INFORMATION ABOUT YOUR CHILD
What school or daycare is your child currently enrolled in? (If your child is at home, who is the primary care provider?)
Please list any special considerations your child may have such as allergies or medical history.

FOR OFFICE USE ONLY:

Date Application Received: _____ Date Fee Received: _____