MI CASITA montessori
A Diverse, Bilingual Community

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 Infant, 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 waitlist students. In an effort to maintain diversity, waitlist 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/Secondary Language: _____

Do you already have a child on our Waitlist? (If yes, list name and DOB) _____

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: _____

Cell Phone: _____ 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: _____