

Montessori at Roseborough

EDUCATION AS A PREPARATION FOR LIFE

Dear Parents,

Thank you for your interest in Montessori at Roseborough. Established in 1983, the school has been an integral part of the community since then. As one of the few certified AMI (Association Montessori International) schools in the State of Florida, we provide a traditional Montessori education as well as a child-centered, nurturing environment.

We are committed to establishing the intellectual, emotional, and physical foundation that will develop your child's skills to become a well-rounded individual. Your child will have the opportunity to excel academically while learning to respect themselves and others. In addition, they will discover how to handle conflicts and build a sense of purpose.

We welcome families in becoming active participants in our community. Whether you attend our Parent Information Nights, workshops, Cosmic Coffee, volunteer or participate in field trips, we encourage and support your commitment to your child's education.

I look forward to welcoming you and your child to Montessori at Roseborough.

Sincerely yours,



Mia Crabill
Head of School

Montessori at Roseborough

751 East 5th Avenue
Mount Dora, FL 32757
352-735-2324 www.montessoriatroseborough.com

Office Use Only

Classroom	_____
Child's First Day	___/___/___
Scholarship	_____
Donation	_____
ProCare	_____
Tuition Express	_____

Application for Admission 2022/2023 School Year

Date _____

Application is hereby made for the admission of _____ Boy Girl

Date of Birth (mm/dd/yy): _____ Age this school year on August 1st : _____ yrs. _____ mos. (ex. DOB 06/01/19, 3 yrs 2 mos.)

Please check one	Academic Program	Days	Hours
<input type="checkbox"/>	Infant	Monday - Friday	8:30 am - 12:00 pm
<input type="checkbox"/>	Toddler	Monday - Friday	8:30 am - 11:45 am
<input type="checkbox"/>	Morning Primary	Monday - Friday	8:30 am - 12:15 pm
<input type="checkbox"/>	Extended Primary	Monday - Friday	8:30 am - 3:00 pm
<input type="checkbox"/>	Elementary	Monday - Friday	8:30 am - 3:15 pm
<input type="checkbox"/>	Middle School/Adolescent Program	Monday - Friday	8:15 am - 3:30 pm

Family Information

Parent's Name: _____ Parent's Name: _____

Home Address: _____ Address: _____

City/Zip: _____ City/Zip: _____

Home Phone: _____ Home Phone: _____

Cell Phone: _____ Cell Phone: _____

Cell Carrier (for texting): _____ Cell Carrier (for texting): _____

Employer: _____ Employer: _____

Work Phone: _____ Work Phone: _____

E-mail: _____ E-mail: _____

In signing this agreement, parent or guardian has read the front and back of the Application for Admissions, and agreed to all policies and procedures stated. The parent/guardian acknowledges receipt of "Know Your Child Care Facility" (for children 5 and under) and DCF brochure "The Flu". (August/September enrollments only.)

Both parents must sign below.

Date _____ Signature _____ Parent/Legal Guardian Phone _____

Date _____ Signature _____ Parent/Legal Guardian Phone _____

Section 65c-22.006(2), F.A.C., requires a current physical examination and Immunization record within 30 days of enrollment.
Section 402.3125(5), F.S., requires that parent receive a copy of the Child Care Facility Brochure, *Know Your Child Care Center*.
Section 65c-22.006(4)(c)2., F.A.C. requires that parents are notified in writing of the disciplinary practices used by the school.

Continued on back

Policies for Montessori at Roseborough, Inc.

ADMISSIONS: *Applicants to Montessori at Roseborough are accepted on the basis of age, previous experience, and a family interview.* We welcome children of any race, creed, or ethnicity. If classes are full, applicants will be placed on a waiting list, with students previously enrolled at the school having priority and their siblings, second priority.

PLACEMENT: Placement of new students is determined by school staff in a consultation with the parents. Consideration is given to available spaces in our programs and class composition.

ADVANCE FEE: A non-refundable advance fee will hold your child's place at the school. Applications will not be processed until the advance fee has been received.

TUITION PAYMENTS: Payments will be processed through Tuition Express on the first business day of each month, August-May. A 10% penalty will be assessed for payments received after the fifth (5th) of the month.

TAX BENEFIT NOTE: An income tax credit for child-care cost may be available for families in which both parents work or a single parent works. Please consult your tax professional.

AGREEMENTS *please initial each*

_____ I will pay the full tuition as indicated per the current published schedule. Tuition is not subject to adjustment because of illness, holidays, absence, or withdrawal. Tuition will not be refunded should school close due to Covid virus related issues.

_____ I understand that completion of a school year is necessary for consistency in my child's education. I am accordingly enrolling my child for the full school year [or remainder thereof]. I understand furthermore that Montessori philosophy embraces three learning cycles considered fundamental to every child's education; namely, the Infant/Toddler Program [3 months-3 years], Primary [3-6 years], Elementary [6-12 years], Middle School/Adolescent Program (12-15 years) in a Montessori school setting.

_____ I agree that, if I should decide to withdraw my child from his/her program prior to the end of the school year, I will provide written notice one month in advance, or assume responsibility for one month's tuition beyond un-notified withdrawal.

_____ The Head of School has the right to request the withdrawal of a child at any time if it is deemed to be in the best interest of the student body. In this event, reimbursement will be made for prepaid tuition.

_____ A current medical exam, immunization record and birth certificate will be submitted before admittance to the class.

_____ I agree to attend parent information meetings and conferences as listed on the school calendar. The School can best assist a child's development when communicating effectively with the child's primary care providers.

_____ I agree to permit the participation of my child in portrayals of school activities in photographs, films, slides, or other representations of the school. This may include ads, brochures, Facebook, teacher training, newsletters and website etc.

_____ I agree to permit the participation of my child in any field trips organized by the school.

_____ I agree to follow procedures and policies explained in the Parent Handbook and memos to parents. I acknowledge and agree I have received, read, and understood the Parent Handbook. I have had the opportunity to discuss the school policies and procedures with my child's teacher.

_____ In case of emergency, permission is granted for my child to be treated at a hospital.

_____ I agree to have my contact information listed in the school directory.

_____ I am aware a canine is regularly on the school grounds.

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QUESTIONS FOR EDUCATIONAL AND FAMILY BACKGROUND

Please answer the questions applicable to your child's age

- Please list all schools/daycare centers your child has attended:

Name of school _____ City, State: _____ Dates Attended: _____

Name of school _____ City, State: _____ Dates Attended: _____

Name of school _____ City, State: _____ Dates Attended: _____

- Describe your child's first transition from parental care.
- Please explain reasons for changing schools in the past.
- Describe your child's greatest interest or favorite activity.
- Does your child have any clinically diagnosed learning differences?
- Has any testing, tutoring, or counseling been suggested for your child (eg. physical, occupational or speech therapy)? If so, what steps were taken?
- Why do you want your child to be in a Montessori school?

Continued on back

Family and child care information questions:

- Siblings:

Name: _____ Age _____ School _____

Name: _____ Age _____ School _____

Name: _____ Age _____ School _____

- Describe relationship between siblings:

- Custody: Mother ___ Father ___ Both ___ Other ___

- Living Arrangements:

During the week? _____

Weekends? _____

- Who takes care of your child in addition to the parent(s)?

- Is your child involved in other group participation activities? Please describe these:

- Is your child eligible for any State scholarships? If so, please list.

- What else would you like us to know about your child or your family?

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Tuition Contract 2022/2023 School Year Rates/Terms/Conditions

I am enrolling _____
 Last Name First Middle Date of Birth Age Today

ENROLLMENT/TUITION RATES Please select

Check one	Hours	Academic Program	Age	Advance Fee*	10 Monthly Payments of	Yearly Tuition**	Activity Fee***
	8:30-12:00 pm	Infant	3 mo to 12 mo	\$500	\$780	\$8,300	n/a
	8:30-11:45 am	Toddler	12 mo to 35 mo	\$500	\$680	\$7,300	n/a
	8:30-12:15 pm	Morning Primary	3 yr to 4 yr	\$500	\$601	\$6,510	n/a
	8:30-3:00 pm	Extended Primary	4.5 yr to 6 yr	\$500	\$785	\$8,350	n/a
	8:30-3:15 pm	Elementary	6 yr to 12 yr	\$500	\$858	\$9,085	\$120 (ages 6-8) \$425 (ages 9-12)
	8:15-3:30 pm	Middle School/Adolescent Program	12 yr to 15 yr	\$500	\$948	\$9,980	\$425

All programs are Monday through Friday. Phasing into the classroom, short months, vacations, holidays, and absences do not reduce monthly payments. \$25 of the Advance Fee goes toward the Association Montessori International (AMI) School Recognition fee.

***Sibling Discount** If more than one child is enrolled, a **5% sibling discount** is applied to the youngest child's (children's) yearly tuition. The discount is reflected in a reduced Advance Fee.

**** Pre-Pay Discount** 5% for tuition paid in full by May 1. 2% for tuition paid in full by the first day of school. **Cash or check only.**

***** The Activity Fee will be charged in full with tuition on August 1st.**

AFTER SCHOOL CARE PROGRAM (Billed in arrears.)

All outstanding balances must be paid to use Before and After School Care. Monthly Block rates are available on the back of this page.

Program	Age Group	Hours Available	Fee*
Before School	3 years to 15 years	7:00 am - 8:00 am	\$6.00 per day
Infant	3 months to 12 months	12:00 pm – 5:00 pm	\$7.00 per hour
Toddler Extended Hours	13 months to 35 months	11:45 am – 5:00 pm	\$6.75 per hour
Primary/Elementary/Middle School	3 years to 15 years	12:15 pm – 6:00 pm	\$6.00 per hour

*Children not picked-up within fifteen minutes of dismissal will be placed in the After School Program. Children picked up after 6 pm will be charged \$10 per quarter hour.

I/We the person(s) responsible for paying tuition for the applicant have read both front and back pages of the Montessori at Roseborough, Inc. Tuition Contract. I/We understand and agree to comply with all rates, terms, and conditions. Both parents must sign below.

Date _____ Signature _____ Parent/Legal Guardian Phone _____

Date _____ Signature _____ Parent/Legal Guardian Phone _____

Montessori at Roseborough, Inc. admits any student of any race, color, national, and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to the students. Montessori at Roseborough, Inc. is a non-profit corporation.

**Tuition Contract 2022/2023 School Year
Rates/Terms/Conditions continued**

RESERVING A SPACE. In order to reserve a space for your child, a **non-refundable annual \$500 Advance Fee is required with completed application. Health and immunization records as well as a copy of birth certificate** are due on or before the first day's attendance.

PAYMENT TERMS. Tuition and related fees will be processed through Tuition Express, an automated monthly payment process. Families are required to sign up to Tuition Express and allow the school to directly draw funds due from the credit card or checking account supplied to us. Equal monthly payments will be processed on the first business day of each month from August to and including May. Declined payments will incur a \$30 fee. Two consecutive payment declines will result in cash only going forward. A **10% late fee will be applied to payments received after the fifth.** All associated legal fees incurred to collect past-due amounts will be paid by the signers of this contract.

WITHDRAWALS. A **30-day written notice of intent to withdraw is required for release from this contract.** You will be responsible for tuition during the 30-day notice whether your child attends the program or not. Records will be released when the account is paid in full.

2022/2023 After School Block Rates
(Billed in advance)
Please check if you intend to use

Infant Extended Hours (3 months – 1 year)

Check one	Monday-Friday	Monthly Rate
	12:00 p.m. - 5:00 p.m.	\$650.00

Toddler Extended Hours (1 year – 35 months)

Check one	Monday-Friday	Monthly Rate
	11:45 a.m. - 3:00 p.m.	\$400.00
	11:45 a.m. - 5:00 p.m.	\$655.00

Primary/Elementary/Middle (3 Years and up)

Check one	Morning dismissal	Monthly Rate
	12:15 p.m. - 3:00 p.m.	\$300.00
	12:15 p.m. - 6:00 p.m.	\$630.00
Check one	Afternoon dismissal	Monthly Rate
	3:00 p.m. - 6:00 p.m.	\$330.00
	3:15 p.m. - 6:00 p.m.	\$300.00

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EMERGENCY INFORMATION RECORD 2022/2023

D.O.B: ___/___/___

CLASS: _____

CHILD'S NAME: _____

Last

First

Middle

ADDRESS: _____

City

State

Zip

PARENT'S NAME: _____

Home phone: _____ Work Phone: _____ Cell Phone: _____

PARENT'S NAME: _____

Home phone: _____ Work Phone: _____ Cell Phone: _____

MEDICAL INFORMATION

ALLERGIES/DIETARY RESTRICTIONS: _____

CURRENT MEDICATIONS: _____

OTHER CONCERNS: _____

PERSONAL PHYSICIAN: _____

TELEPHONE: _____

We are required by DCF to have a MINIMUM OF THREE local emergency contacts other than parents.

Please list adults who may be called in case of an emergency and/or are allowed to pick up. Check appropriate boxes.

1. Non-Parent Name: _____ Emergency Contact Pick Up

Relation: _____ Home/Work Phone: _____ Cell Phone: _____

2. Non-Parent Name: _____ Emergency Contact Pick Up

Relation: _____ Home/Work Phone: _____ Cell Phone: _____

3. Non-Parent Name: _____ Emergency Contact Pick Up

Relation: _____ Home/Work Phone: _____ Cell Phone: _____

4. Non-Parent Name: _____ Emergency Contact Pick Up

Relation: _____ Home/Work Phone: _____ Cell Phone: _____

5. Non-Parent Name: _____ Emergency Contact Pick Up

Relation: _____ Home/Work Phone: _____ Cell Phone: _____

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Walking Field Trip Form

2022/2023 School Year

I grant permission for my child, _____, to participate in walking field trips off the school campus throughout the year (2022-2023).

Signature of Parent or Guardian

Date

Discipline Policy

There are only three important rules in the classroom. The three rules are: we do not hurt, destroy, or disturb. If a child is having difficulty following the rules, he or she first is reminded quietly, then redirected by being asked what work he or she would like to choose. We have found this method to be very effective. If the problem persists, the child is removed from the setting temporarily to think about what he or she would like to do depending on the situation. They are then given the choice of going back to work when ready.

While on the playground we allow the children to interact freely. Often they settle their own disagreements. We do step in if the play or actions could result in injury to anyone. Specific rules for using playground equipment are taught and enforced. Children may not be denied active play as a consequence of misbehavior. Methods of discipline practices will not include the use of spanking or other forms of physical punishment, nor should they be associated with food, rest, and/or toileting. Discipline methods permitted are age appropriate and constructive.

Our classrooms are social environments. The children are engaged not only in academic learning but also in learning the rules of social interaction. This is not possible in an environment that inhibits interaction between students. As long as an interaction does not hurt, disrupt, or disturb, it is allowed.

Signature of Parent or Guardian

Date

“A child's liberty should have as its limit the interests of the group to which he belongs. Its form should consist in what we call good breeding and behavior. We should therefore prevent a child from doing anything which may offend or hurt others, or which is impolite or unbecoming. But everything else, every act that can be useful in any way whatever, may be expressed.”

-Maria Montessori, The Discovery of the Child, chapter 3, page 51.

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Volunteer Sign-Up Sheet 2022/2023 - To fulfill yearly 10 hr volunteer requirement

Each school year you may donate either your time (10 hrs) or \$100 for those parents with limited availability. The 10 hours can include any of the categories listed below or feel free to suggest an activity.

Parent Name: _____

Child's Name: _____ Child's Class: _____

Telephone Number: _____ E-mail: _____

The wealth of knowledge and experience each of you can offer enriches the cultural and geographical areas of our classrooms. For example, if you and your family have traveled abroad or in the United States, or are from a different cultural heritage, you can share these experiences with the class to enrich its knowledge of other areas with which they may be unfamiliar. Any foods, clothing, or any other cultural information that will bring a hands-on experience to the children are greatly appreciated.

Due to the numerous religious as well as non-religious holidays celebrated in our country, any input on these events is welcome. Please include what traditions you follow.

The profession you hold is equally important to us from the Children's House through Middle School. Please include any and all training you have that we might share with the children. For example (but not limited to): musicians, firefighters, police officers, nurses, bicycle repair technicians, mechanics, and doctors. The children really enjoy their families' participation. We hope each of you share at least one aspect of your daily lives with us through the years to come.

_____ DONATION \$100

(In lieu of 10 Volunteer Hours)

_____ Annual Auction/Reverse Draw Volunteer

_____ Classroom Materials

_____ Sewing

_____ Lend an Ear to New Readers

_____ Assist with Art Projects

_____ Classroom Substitute

_____ Outdoor Clean-up Projects

_____ Gardening

_____ Field Trip Driver

_____ Music

_____ Sand/Refinish Wood Furniture

_____ Make Wood Furniture

_____ Other Carpentry Projects

_____ Technical support

_____ Share your profession, tradition, culture,
or hobby

_____ Other - please elaborate



Automated Payment Processing Safe – Convenient – Easy

We are excited to offer the safety, convenience and ease of Tuition Express® – a payment processing system that allows secure, on-time tuition and fee payments to be made from either your bank account or creditcard.

ELECTRONIC FUNDS TRANSFER AUTHORIZATION FOR **BANK ACCOUNT** and **CREDIT CARD**

I (we) hereby authorize (business name) _____ to initiate credit card charges to the below referenced credit card account (**Section A**) OR, initiate debit entries to my (our) Checking or Savings Account, indicated below (**Section B**). To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice. Credit Union Members: Please contact your Credit Union to verify account and routing numbers for automatic payments. Check with the center for accepted credit card types.

COMPLETE ONE SECTION ONLY

SECTION A (Credit Card)

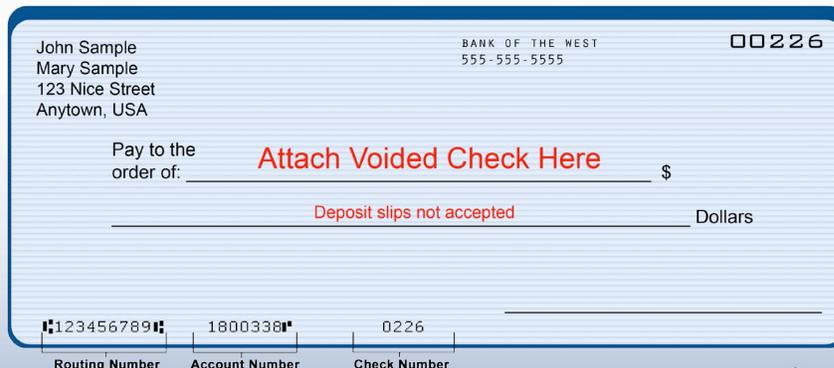
Cardholder Name	Phone #		
Cardholder Address	City	State	Zip
Account Number	Expiration Date		
Cardholder Signature	Date		

SECTION B (Bank Account)

Your Name	Phone #					
Address	City	State	Zip			
Bank or Credit Union Name	Bank or Credit Union Address	City	State	Zip	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings
Routing Transit Number (see sample below)	Account Number (see sample below)					

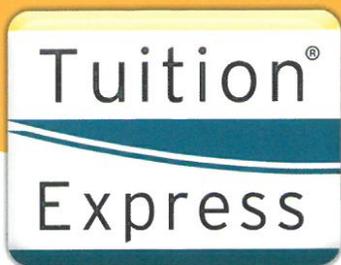
For Official Use Only

Date Received
Employee Signature



A service of





**Convenient and Safe
On-time Payments**



Frequently Asked Questions by Parents

We are excited to offer automatic payments through Tuition Express. With this service it is no longer necessary for you to write a check for tuition and fees. Payments will be automatically debited from your bank account or charged to your credit card. All payments are secure and you can even choose to have a receipt emailed to you after each transaction. It's easy to sign up—just ask your child care provider.

When I pay my tuition automatically, how secure is my account information?

Very secure—more secure than when you write checks. The checks you write every day have your name, address, phone number, and sometimes your driver's license number on them. With this information, criminals have all they need to access your account, or worse, steal your identity. Automatic payments greatly reduce this potential by limiting the amount of information available and the number of people who have access to it. Tuition Express also incorporates additional security procedures, utilizing 128-bit encryption.

What if the child care provider makes a mistake and takes out too much money?

Report the error immediately—it was likely an honest mistake. The child care provider will adjust your account accordingly.

What if my child care center and I disagree about a payment?

If you feel that the payment should not have been made, you have the right to dispute the charge. Contact your bank or credit card company. Tuition Express and your child care provider will work closely to resolve the issue in a timely manner.

Does this form of payment give the child care center access to my account?

Nobody at the child care center has access to your account. When you sign up for Tuition Express, you only authorize your bank or credit card company to release the exact amount owed to your provider, when it is due and payable.

How will I know when a payment is taken out of my account?

Payments will be taken out of your account on a schedule that you and the child care provider agree upon. Your provider has the ability to email (or print) statements for your records prior to the withdrawal of any money. Additionally, charges will show up on your monthly statement under "Tuition Express".

When I sign up for Tuition Express, how will this help my child care provider?

Your child care provider has chosen to offer automatic payments for several reasons. First, it will give you the convenience of not having to write a check every time tuition and fees are due. Second, it allows regular scheduling of your payments. Third and most importantly, automatic payments reduce the amount of time your child care provider spends on administrative tasks, giving staff more time to spend with the children.

How do I get started?

Simply complete the "Payment Authorization" form and return it to your child care provider. They will do the rest!

Where can I learn more?

For more information on the benefits of Tuition Express, please visit us at tuitionexpress.com.