

**STARTING POINT MONTESSORI CENTER, INC.**

*\* A Detroit Private School \**

**APPLICATION FOR ENROLLMENT**

Applying for School Year 20 -     

**CHILD INFORMATION**

Child Last Name	Child First Name	M.I.	Date of Birth
Home Address	City	State	Zip Code

**Applicant lives with (check box below):**

Both Parents     Mother     Father     Other, specify: \_\_\_\_\_

**PARENT / GUARDIAN INFORMATION**

Mother's Name		Father's Name	
Home Phone		Home Phone	
Cellular Phone		Cellular Phone	
Soc. Sec. No. (Last 4 digits)		Soc. Sec. No. (Last 4 digits)	
Email Address		Email Address	

**Check if Applicable:**

Parents Married     Parents Separated     Parents Divorced     Single Parent     Student Adopted

Mother Remarried     Father Remarried     Mother Deceased     Father Deceased

Mother's Place of Employment and Occupation	Work Phone	Work Hours
Father's Place of Employment and Occupation	Work Phone	Work Hours

**EMERGENCY CONTACT INFORMATION**

1 <sup>st</sup> Contact Name		2 <sup>nd</sup> Contact Name	
Relationship		Relationship	
Phone Number		Phone Number	

**Please call to schedule an appointment and tour!**

7578 Puritan St., Detroit, MI 48238-1210  
(313) 341-8285