

SCHOOL HISTORY:

Name of School	Location	Date Enrolled	Date Left
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Current

Previous

What is your child's first language? Mandarin English or Other _____

FAMILY INFORMATION:

Student lives with ___ both parents or with ___ mother ___ father ___ guardians

Father

Mother

Name _____

Address _____

(If different from the student's)

Home Telephone Number _____

Mobile Phone Number _____

E-mail address _____

ALLERGY INFORMATION:

Does your child have any allergies or is your child allergic to any food or fruit?

_____ No _____ Yes If yes, please specify:

Names of applicant's siblings currently enrolled in Trust Montessori School:

_____	_____
Name	Class

_____	_____
Name	Class