



# ST. FRANCIS MONTESSORI

## New Family Application Form 2026 - 2027



### Contact Information

Family Name		Preferred Contact Person	
Street Address	City	State	Zip
Father's Name	Home Phone	Business Phone	Cell Phone
Mother's Name	Home Phone (if different)	Business Phone	Cell Phone
Father's Email		Mother's Email	

### Program Selection

First Child's Full Name	Age Sept 1, 2026 ____yr. ____mo	Date of Birth	Date of Baptism (if baptized)
<p>Please select a program. Please write names in order of Elementary, Full Day Primary, Morning Primary, Catechesis.</p> <p><input type="checkbox"/> Elementary Program (6-12 yrs) 8:15 AM – 3:15 PM Monday–Friday \$6150</p> <p><input type="checkbox"/> Full Day Primary Program (5-6 yrs) 8:15 AM – 3:15 PM Monday–Friday \$5300</p> <p><input type="checkbox"/> Morning Primary Program (3–4 yrs) 8:15 AM – 12:00 PM Monday–Friday \$4500</p> <p><input type="checkbox"/> Catechesis-only (aka Atrium-only) with no other children enrolled at SFM \$400</p> <p><input type="checkbox"/> My family qualifies for the UD Faculty Discount \$750, Montessori-only.</p> <p><i>Additional fees, such as registration, materials, supplies, etc., will be on the enrollment forms.</i></p>			
Second Child's Full Name (if applicable)	Age by Sept 1	Date of Birth	Date of Baptism (if baptized)
<p><input type="checkbox"/> Elementary    <input type="checkbox"/> Full Day Primary    <input type="checkbox"/> Morning Primary    <input type="checkbox"/> Catechesis only</p> <p>Tuition for a second child is \$4800 for Elementary, \$3100 for Primary Full Day, \$2500 for Primary Morning \$375 for Catechesis</p>			
Third Child's Full Name (if applicable)	Age by Sept 1	Date of Birth	Date of Baptism (if baptized)
<p><input type="checkbox"/> Elementary    <input type="checkbox"/> Full Day Primary    <input type="checkbox"/> Morning Primary    <input type="checkbox"/> Catechesis only</p> <p>Tuition for a third child is \$4150 for Elementary, \$2000 for Primary Full Day, \$1450 for Primary Morning \$275 for Catechesis</p> <p><b>For additional children, please add their information to the back. Fourth (or more) children have free tuition.</b></p>			
<b>Total tuition.</b> <input type="checkbox"/> Our family is requesting a position in the Work Exchange Program; the financial aid application is available upon request.  <p style="text-align: right;">Total tuition for all programs selected: \$_____</p>			

**First Child**

Please help us get to know your child by providing the following information.

**Temperament.** Which best describes your child's temperament in group settings?

☐ Outgoing and social

☐ Shy, needs encouragement

☐ In between

Comments: \_\_\_\_\_

**Recreation.** Describe the child's play / leisure activities:

Outdoors: \_\_\_\_\_

With other children: \_\_\_\_\_

Favorite activities, games: \_\_\_\_\_

Favorite toys, books: \_\_\_\_\_

Does he/she watch television? \_\_\_\_\_ How many hours per day? \_\_\_\_\_

Programs watched: \_\_\_\_\_

**Education.** Please list any school previously attended.

School: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Hours/day: \_\_\_\_\_ Days/week: \_\_\_\_\_  
mo./yr. mo./yr.

**Second Child**

**Temperament.** Which best describes your child's temperament in group settings?

☐ Outgoing and social

☐ Shy, needs encouragement

☐ In between

Comments: \_\_\_\_\_

**Recreation.** Describe the child's play / leisure activities:

Outdoors: \_\_\_\_\_

With other children: \_\_\_\_\_

Favorite activities, games: \_\_\_\_\_

Favorite toys, books: \_\_\_\_\_

Does he/she watch television? \_\_\_\_\_ How many hours per day? \_\_\_\_\_

Programs watched: \_\_\_\_\_

**Education.** Please list any school previously attended.

School: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Hours/day: \_\_\_\_\_ Days/week: \_\_\_\_\_  
mo./yr. mo./yr.

**Third Child****Temperament.** Which best describes your child's temperament in group settings?☐ Outgoing and social☐ Shy, needs encouragement☐ In between

Comments: \_\_\_\_\_

**Recreation.** Describe the child's play / leisure activities:

Outdoors: \_\_\_\_\_

With other children: \_\_\_\_\_

Favorite activities, games: \_\_\_\_\_

Favorite toys, books: \_\_\_\_\_

Does he/she watch television? \_\_\_\_\_ How many hours per day? \_\_\_\_\_

Programs watched: \_\_\_\_\_

**Education.** Please list any school previously attended.School: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Hours/day: \_\_\_\_\_ Days/week: \_\_\_\_\_  
mo./yr. mo./yr.*(For additional children, please add their information to the back of this page.)***Family and Home****Parents**Marital status: ☐ Married ☐ Separated ☐ Divorced ☐ WidowedIf divorced or widowed, are parents remarried? ☐ Father ☐ Mother

Age(s) of child(ren) when divorce/separation/death occurred: \_\_\_\_\_

Religion or denomination: Father: \_\_\_\_\_ Mother: \_\_\_\_\_

Has either parent ever been convicted of a crime? ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_

Father's occupation: \_\_\_\_\_ Place of business: \_\_\_\_\_

Mother's occupation: \_\_\_\_\_ Place of business: \_\_\_\_\_

**Home life**

Is either parent away for prolonged periods? \_\_\_\_\_

Does anyone other than the parents regularly care for the child(ren)? \_\_\_\_\_

Who? \_\_\_\_\_ How many hours/day? \_\_\_\_\_

At home? \_\_\_\_\_ If not, where? \_\_\_\_\_

List any other children in the family, with ages: \_\_\_\_\_

List any other members of the household: \_\_\_\_\_

**Additional Information**

How did you hear about St. Francis Montessori? Did anyone refer you to Saint Francis?

How did you come to the decision to send your child(ren) to a Montessori school or Catechesis of the Good Shepherd Atrium?

What do you expect for your child(ren) from St. Francis Montessori?

Does (do) your child(ren) have any special needs that we should be aware of? Have there been any significant events in the life of your child(ren) that we should be aware of?

**Signature**

- ☐ I understand that St. Francis Montessori has the right to accept or reject applicants based on its own standards, in the interest of maintaining a productive growth and learning environment for all children.
- ☐ My non-refundable application fee of \$25, payable to St. Francis Montessori, is enclosed with a check  
OR
- ☐ My non-refundable application fee of \$25, noted appropriately, is sent through electronic payment using Venmo @SFM-Irving or Zelle [accounts@stfrancisirving.org](mailto:accounts@stfrancisirving.org).

\_\_\_\_\_  
Signature\_\_\_\_\_  
Date

St. Francis Montessori is a nonprofit corporation dedicated to Montessori education. St. Francis admits students of any race, color, and national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, or national or ethnic origin in the administration of its educational policies, admissions policies, scholarship programs, or other school-administered programs. Admissions are based on the space available and an evaluation of the suitability of St. Francis Montessori for each student.