



Creative Montessori Academy

Request for My Child to Attend Kindergarten for the 2017-2018 school year

Child's Full Legal Last Name: _____
(As it is written on Birth Certificate)

Child's Full Legal First Name: _____
(As it is written on Birth Certificate)

Child's Current Age: _____

Child's Date of Birth: _____

Did your child attend pre-school? Yes or No

If so where? _____

How many years? _____

Please write a brief paragraph stating why you would like your child to begin Kindergarten before state recommended deadline of September 1, 2017:

Parent writing request Full Legal Name (print): _____

Signature of Parent writing request: _____

Date of Signature: _____