

Application Form: e¹ (Grades 7 & 8)

Student Information: To be Completed by a Guardian of Applicant

Student's Name:

_____ (_____) _____
First Preferred Last

Home Address:

Grade application is for: _____ Date to begin: _____

Birthday (M/D/Y) _____ Present Grade: _____

Present School:

_____ Name Address

Years Attended: _____ Grade level completed: _____

Previous School:

_____ Name Address

Years Attended: _____ Grade level completed: _____

Parent/Guardian 1 Information:

Name:

_____ (_____) _____
First Preferred Last

Home address:

Preferred E-mail: _____ Home phone: _____

Cell Phone: _____ Work Phone: _____

(Please see other side)



Parent/Guardian 2 Information:

Name: _____
First Preferred Last

Home address: _____

Preferred E-mail: _____ Home phone: _____

Cell Phone: _____ Work Phone: _____

All correspondence should be sent to: Guardian 1 Guardian 2 Both

Signature (Guardian 1): _____ Date: _____

Signature (Guardian 2): _____ Date: _____

Please

- E-mail to sarah@elementhighschool.com, or
- drop off to The Element High School:

- ✓ **this application**
- ✓ **copies of the student's two most recent report cards**
- ✓ **the Teacher Reference Form**
- ✓ **the \$250 Application fee**

The **application fee of \$250** can be paid by cheque (made out to OMS Montessori) with the application package or paid by credit card over the phone to our business office:

OMS Montessori
 335 Lindsay Street
 Ottawa, ON K1G 0L6
 613-521-5185
 Business hours: 8:00 AM to 4:30 PM

