Application Checklist

☐ Attended a Williams Walk-Through or Open House event
If not, why?
No, we applied at the end of last school year so no walkthrough or open house was available.

☐ Submit an application including:
  ☐ The completed application
  ☐ Two letters of recommendation
  ☐ Unofficial transcript or report card from current school

I hereby submit this application for my son/daughter to Williams Secondary Montessori. I understand that should my son/daughter enroll, I will be asked to commit to lending my positive efforts to the program’s growth. I must be willing to participate in the Parent-Teacher-Student Organization (PTSO) and willing to participate in other fund-raising efforts. I will commit to meeting the volunteer and service expectations during the school year.

__________________________________________________
Parent/guardian signature

__________________________________________________
Date

__________________________________________________
Parent/guardian signature

__________________________________________________
Date

If you have any questions, please contact Donna Rice at 980-343-0040. Completed applications can be submitted to Donna Rice at donnag.rice@cms.k12.nc.us or mailed to 2400 Carmine Street, Charlotte, NC 28206.
Application for Admission: Part A

Instructions: Part A of the Application, including the Parent/Guardian Statement should be completed by the parent(s). Part B of the Application, including the essay, should be completed by the applicant. Parts A & B should be returned to Williams Secondary Montessori along with the application checklist.

Student Information:

___________________
CMS ID

<table>
<thead>
<tr>
<th>First Name</th>
<th>Middle Name</th>
<th>Last Name</th>
<th>Current Grade Level</th>
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<th>Home Address</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
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<th>Student’s Phone</th>
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<table>
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<tr>
<th>Date of Birth</th>
<th>Gender</th>
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School History

<table>
<thead>
<tr>
<th>Current School Name</th>
<th>Phone</th>
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<table>
<thead>
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<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
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Fax

<table>
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<tr>
<th>Name of Student’s teacher/advisor</th>
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List the names and dates of previous schools your child has attended, back to age 5:

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<thead>
<tr>
<th>School Name</th>
<th>Dates</th>
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<table>
<thead>
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<th>School Name</th>
<th>Dates</th>
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<th>School Name</th>
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**Parent/Guardian Information:**

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<tr>
<th>Parent/Guardian One</th>
<th>Relationship to Child</th>
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<tr>
<td>Home Phone</td>
<td>Cell Phone</td>
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<tr>
<td>Occupation and Title</td>
<td>Employer</td>
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<tr>
<th>Parent/Guardian Two</th>
<th>Relationship to Child</th>
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<tr>
<td>Home Phone</td>
<td>Cell Phone</td>
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<tr>
<td>Occupation and Title</td>
<td>Employer</td>
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</table>

**Please list all other children in the family:**

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<thead>
<tr>
<th>Name</th>
<th>Birth Date</th>
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<table>
<thead>
<tr>
<th>Name</th>
<th>Birth Date</th>
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<table>
<thead>
<tr>
<th>Name</th>
<th>Birth Date</th>
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</tbody>
</table>
Student Name

You may attach additional pages, as necessary.

Parent completing this form: ________________________________

Please list the dates your child has attended a Montessori school: ________________________________

In what ways do you see Secondary Montessori as a good match for you and your child?

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

How do you envision your role in your child’s education?

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

What are your child’s behavioral, social, and/or cognitive strong points?

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
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______________________________________________________________________________

What are your child’s interests and favorite activities away from school?

______________________________________________________________________________
______________________________________________________________________________
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Does your child have any allergies or chronic conditions that require medical treatment?
If yes, please describe.

______________________________________________________________________________
______________________________________________________________________________
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______________________________________________________________________________
Does your child have limitations in participation in the classroom or physical activities? If yes, please describe.

________________________________________________________________________

In the past two years, has your family experienced any significant changes that may have affected your child? (Examples might include: illness, death, relocation, changes in finances or family composition.) If yes, please explain.

________________________________________________________________________

Please describe the regular responsibilities for which your child is accountable for in your household.

________________________________________________________________________

What are the key goals you expect your child to achieve between now and age 15?

________________________________________________________________________

To what other schools is your child applying?

________________________________________________________________________

Why are you looking to change schools for your child at this time?

________________________________________________________________________

Describe your child's previous educational experience. What were the positive aspects and what were the challenges?

________________________________________________________________________

Has your child ever been accelerated, held back, or asked to leave a school? If yes, please explain.

________________________________________________________________________

Has your child undergone any diagnostic or evaluative testing for learning differences or psychological or psychiatric concerns, either in the school or outside the school? If yes, please explain.

________________________________________________________________________

Has your child had any academic challenges that required tutoring or remedial assistance? If yes, please explain.

________________________________________________________________________

Does your child currently have an IEP or 504 plan?

________________________________________________________________________

All questions on this application have been answered honestly and completely.

____________________________________________________________

Parent’s/Guardian’s Signature

Date
Application for Admission: Part B

STUDENT STATEMENT

Student Name: ______________________________________ Current Grade: ______________________________________

Instructions: Please complete the following short-answer questions in the space provided, in your own handwriting. The separate essay question at the end may be typed, if you prefer.

Why would you like to attend Secondary Montessori?

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Why are you leaving your current school or educational setting?

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

What type of independent study would you be interested in pursuing? Why would you select this topic? How would you go about studying it?

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

How would your friends describe you?

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
Everyone has something special to offer. What will you bring to the school that is special and unique?

______________________________________________________________________________
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Please list your interests and activities in order of importance to you:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

What are your experiences outdoors? (Examples: Camping, nature walks, travel, hiking, gardening, etc.)

______________________________________________________________________________
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Student Signature ____________________________ Date ____________________________
Student Essay

Please choose one of the following questions to answer on a separate sheet of paper. There is no length requirement, but be sure to answer the question fully. Please do not seek assistance from anyone in writing this essay – we would like to know your personal perspective.

1. Write about a time when you challenged yourself; this might or might not have been in school.

2. Do you have a hobby? Tell us about it. Be sure to include information about how you became involved in this hobby and why it interests you.

3. Think about someone you know about: An historical figure, a family member, or a friend. How would you describe this person? Why did you choose to write about him or her? What has this person taught you that you may not have learned otherwise?

4. Think about a favorite place. It could be your room, the woods, at school -- anywhere that is special to you. Write a paragraph that describes the place and tell us why it is special to you.
Student Name: ________________________________ Grade Applying for: ________ Date: ____________

The student named above is applying for admission to JT Williams Secondary Montessori in CMS. We appreciate you taking the time to complete this evaluation as your candid responses will help us to gain a better understanding of the applicant.

Parents, please note that this recommendation is confidential and will not be shared with you after being received by JT Williams Secondary Montessori School.

Teacher’s Name: ____________________________ Teacher’s Email: ________________________

School Name: ________________________________ School Phone: ________________________ School Fax: ________________________

For how long and in what capacity have you known the applicant?

Please comment on the applicants following attributes:

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<thead>
<tr>
<th></th>
<th>Outstanding</th>
<th>Excellent</th>
<th>Good</th>
<th>Average</th>
<th>Fair</th>
<th>Poor</th>
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<tr>
<td>Trustworthiness</td>
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<td>Cooperation</td>
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<tr>
<td>Consideration of others</td>
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<td>Independence</td>
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<td>Self-direction</td>
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<td>Creativity</td>
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<td>Intellectual Interests</td>
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</tbody>
</table>

Describe the applicant’s academic achievement in relation to ability:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
Describe the applicant’s emotional maturity in relation to his/her peers:
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Describe the applicant’s character and sense of responsibility:
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Describe any notable disciplinary issues you have encountered with the applicant in the past two years:
______________________________________________________________________________
______________________________________________________________________________

Please describe anything else you would like us to know about this applicant:
______________________________________________________________________________
______________________________________________________________________________

as the parents’ perception of the student matched yours? How did the parents function in the community?
______________________________________________________________________________
______________________________________________________________________________

- With regard to academic ability:
  ___ Recommend with enthusiasm   ___ Recommended   ___ Recommend with reservation
- With regard to character:
  ___ Recommend with enthusiasm   ___ Recommended   ___ Recommend with reservation
- Overall recommendation:
  ___ Recommend with enthusiasm   ___ Recommended   ___ Recommend with reservation

______________________________________________________  _____________________________
Signature                                                  Date

Please complete this form, seal it in an envelope with your initials across the seal and return to the student or email form to donnalrice@cms.k12.nc.us with the student's name in the subject line.
TEACHER RECOMMENDATION

Student Name ___________________________ Grade Applying for ___ Date ___

The student named above is applying for admission to JT Williams Secondary Montessori in CMS. We appreciate you taking the time to complete this evaluation as your candid responses will help us to gain a better understanding of the applicant.

Parents, please note that this recommendation is confidential and will not be shared with you after being received by JT Williams Secondary Montessori School.

________________________________________________ ____________________________
Teacher’s Name Teacher’s Email

________________________________________________ ____________________________
School Name School Phone School Fax

For how long and in what capacity have you known the applicant?

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______________________________________________________________________________

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- With regard to character:
  ___ Recommend with enthusiasm        ___ Recommended        ___ Recommend with reservation

- Overall recommendation:
  ___ Recommend with enthusiasm        ___ Recommended        ___ Recommend with reservation

______________________________________________________

Signature                                      Date

Please complete this form, seal it in an envelope with your initials across the seal and return to the student or email form to donnagrice@ems.k12.nc.us with student’s name in the subject line.