



*The Center for*  
**GUIDED  
MONTESSORI  
STUDIES**

# **Application for Admission Professional Development Program**

## *How to Apply*

**CGMS • 9650 Strickland Road, Suite 103-127 • Raleigh, NC • 27615**

**Toll free: 1-888-344-7897 • Outside North America: 1-941-870-1945 • Fax: 1-941-866-3522**

### ***Requirements***

All students must demonstrate a strong facility with the English language. Some courses require the participant to be a certified Montessori teacher. Please refer to the course description to determine requirements.

### ***Instructions***

- Please fill out the entire application packet (Application Parts A + B and Tuition Agreement)
- Next, send your application packet and full course tuition to the above address.
- Note that full tuition is due with the application (payment plans may be arranged for schools sending multiple students).
- To check the status of your application, please send email to [admissions@guidedstudies.com](mailto:admissions@guidedstudies.com), or call our offices Monday to Friday, 9 am to 5 pm EST.



## Application for Admission Course Selection

### A. *Course*

For which class are you registering? Please check the appropriate start date as well.

Special Needs (5 weeks, \$270)

June 28, 2010                       Oct 4, 2010

Adventure in the Arts - Art and Music (6 weeks, \$310)

June 28, 2010                       Oct 4, 2010

Language Refresher\* (7 weeks, \$345)

June 28, 2010                       Oct 4, 2010

Math Refresher\* (7 weeks, \$345)

June 28, 2010                       Oct 4, 2010

Classroom Leadership\*\* (6 weeks, \$310)

June 28, 2010                       Oct 4, 2010

Introduction to Montessori Philosophy and Early Childhood Overview (9 weeks, \$500)

June 14, 2010

\* Applicants for the Math and Language Refreshers must be certified Montessori Early Childhood Teachers. Please send a copy of your certificate. Exceptions will be considered at the discretion of the course director.

\*\*The Classroom Leadership is offered in partnership with the Montessori Foundation and as such has different start dates.

\*\*\* Discounts are available for multiple applicants from the same school or when enrolling in both a February and April course. Please email or call our office for more information about discounted fees.



# Application for Admission Applicant Information

## *B. Applicant Information*

Name \_\_\_\_\_

Mailing address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

## *C. Education*

College, school or training program    Years Attended    Degree/Major/ Certification

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## *D. Work Experience*

Company/ Organization    Years employed    Major responsibilities

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



# Application for Admission Payment

## *Tuition Agreement*

### E. Party responsible for payments

- Applicant
- Sponsoring School
  - School name \_\_\_\_\_
  - Head of School or Billing Contact name \_\_\_\_\_
  - Phone + Email \_\_\_\_\_
- Other party
  - Name \_\_\_\_\_
  - Relationship to Applicant \_\_\_\_\_
  - Phone \_\_\_\_\_
  - Email \_\_\_\_\_

Please note: Full tuition is due with the application. All funds are denominated in and must be rendered in US currency. Foreign bank drafts, including those from Canada, must account for currency differences.

### B. Payment Options

- Enclosed is a check for \$ \_\_\_\_\_
- Credit card payment
  - Type of card \_\_\_\_\_
  - Name on card \_\_\_\_\_
  - Account Number \_\_\_\_\_
  - Expiration Date \_\_\_\_\_
  - Card holder's signature \_\_\_\_\_
  - Billing address of card holder \_\_\_\_\_

Please send this completed application to: **CGMS**  
**9650 Strickland Road, Suite 103-127**  
**Raleigh, NC • 27615**

**Toll free: 1-888-344-7897 • Outside North America: 1-941-870-1945 • Fax: 1-941-866-3522**