

Recent
Photo of
Child

For Administration Use Only

KG Principal	Registration Dept.	Student's No.	Accounting Dept.



Modern Montessori Kindergarten

TEL : 9626 - 5535190 FAX : 9626 - 5535194 P.O.BOX 1941 - AMMAN 11821 JORDAN

E-mail : kgmms@montessori.edu.jo Website : www.mms.edu.jo

Personal Information

First Name Father's Name
Middle Name Family Name
Full Name As In Passport
Date Of Birth Place Gender Male Female
Nationality Mother Tongue Religion
Grade Applying For Academic Year

Last Kindergarten Attended

Name	Country	Grade	Year

Brothers and Sisters in the MMS

Name	Grade	Year

Parents

Father's Name
Nationality National No. Or Passport No. for Non-Jordanian
Occupation Place of Work
Telephone No. P.O. Box Area Code No.
Mobile No. Fax No.
Email

Mother's Name
Nationality National No. Or Passport No. For Non-Jordanian
Occupation Place of Work
Telephone No. P.O. Box Area Code No.
Mobile No. Fax No.
Email

Home Address

Area Street House No. Tel. No.

Has your child ever been enrolled in any learning support program or requires any learning support needs? Yes No
If yes, please specify.

Has your child ever been diagnosed with any psychological and/ or behavioral problems? Yes No
If yes, please specify.

I hereby authorize Mr. / Mrs. _____ Mobile: _____
To daily accompany my son / daughter from the school on the end of the school day, unless you provide us otherwise in written.

For emergency medical attention, we hereby authorize the Modern Montessori School to take our son/daughter to the designated hospital and give consent for all necessary treatment.

Other person (s) and number (s) to call in case of an emergency:

Name	Telephone No.	Relation

Bus Service Yes No One Way Return Trip

I, the undersigned, acknowledge that I am the personal parent/guardian of the student: _____ . I attest that all the information provided in this application to the Modern Montessori School is correct and that the amount of **750 Jordanian Dinars** submitted with this letter is for admission fees. I understand that this amount is **non-refundable** in the event of withdrawal. I pledge to pay the full school tuition and all related fees for the current school year and for all subsequent school years (including any tuition modifications) that my child is enrolled at MMS.

I will provide the school with all the necessary documents in full to join the school as soon as I receive the Admission Notice. I declare that I have agreed on the value of school fees and the schedule of payment, and I agree to register my child for the full academic year with the school's approval.

I acknowledge that I am not entitled to ask the school to recover the premium and/or any part of it due to the student's absence, illness, withdrawal or dismissal by the school.

Parent's Name	Signature	Date

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Grade		Notes:	
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Registrar	Signature	Date