

Montessori Elementary Teacher Training Course (6 to 12)

Application 2024-2025

Name:						SIN No.	(Canadian/PR only)	
(as written in your passport)	Family		First/Middle			Birthdate: _	(D/M/Y	
Address:								
Numbe	er. Street	, ,	City		Province	Country	Postal Code	
Contact: () Home	()	Business or Colled			Email		
Birthdate:	Home	Home Business or Cellphone						
	Year/Month/Day							
Status in Canada	Canadian Citizen Permanent Resident		<u> </u>	Country of Citizenship		🗌 Student Permit		
First Language	English	U French		Other				
Education	Secondary School							
	College/University					Gradua	ate Year and Level	
	Montessori Education							
	AMI Primary Diploma							
						Graduate Yea	ar and Diploma Number	
must include	 Two recent Canadian passport-size photos Two pieces of Government issued photo ID Health Certificate and Immunization Record A non-refundable \$250 application fee (\$350 for international student) Official transcript from all post-secondary institutions attended Proof of Language Proficiency (if English is not first your Language) Criminal Record Check e-CRC (local) or Consent Form (international) One Reference from a personal source) 2 Letters of Recommendation (from someone who has worked with you in a supervisory role) 			 b) What influthis level? c) Why have Montesso d) How do you Criteria for Academic s Clear oral a Capacities for Collaboration Access to e 	Montessori Teacher Training?			
How did you hear about us?	Word of mouth	Website	Advertisement	Other	, please specify:			
Tuition and Course Fees			_					
	Application Fee:	posit due upon accepta y 5, 2024), 2024 , 2025 mbership due on Janua on January 5, 2024	payable as follows: nce ry 5 2024 & June 30, 202				Date received Method of payment	
	\$ 250 Examination Fe \$ 500 Materials Fee p \$17,850 Program Fee Op	oaid in 2 installments o	n June 30, 2024 & June 3 1 in full 🛛 🗍 Pay	in 3 installments				
	\$ 500 Materials Fee p	paid in 2 installments o						

Signature of Applicant

Print Name

Date

