APPLE MONTESSORI SCHOOLS

DEVELOPING THE FOUNDATION FOR A LIFETIME OF SCHOOL SUCCESS!

Dear Parents,

A child's first steps are an unforgettable milestone for all parents. Moving from crawling to walking and eventually running is a time of dramatic growth and emerging self-reliance and independence. As our children move into toddler and pre-school ages their realities become more complex than just the simple physical. Intellectual, academic, social, cognitive, and creative growth makes up the complex foundation of their future foundation and success.

At Apple Montessori Schools we are very proud of our 40 year allegiance to excellence in education and we commend you for pursuing that excellence for your child! Together as educators and parents we will work to strengthen autonomy and a love of learning as we impart the skills needed for overall intellectual and social success. Our commitment to your child and our ability to provide an exceptional education in a safe, nurturing environment is stronger than ever!

Apple's "Montessori Plus" approach to learning offers our students a well-rounded, rich curriculum that combines Montessori with the best modern learning materials, games and programs. With an emphasis on basic skills and comprehensive programs in Music, Art, Foreign Language, Technology and Character Education, we instill in our students a desire to learn as independent thinkers and eventually productive citizens. The love of reading and learning shown by our students is truly infectious and something we are very proud of!

As a parent of an Apple Montessori student, we respect your commitment to the schools and look forward to maintaining our highest educational visions for the future and for your child. Thank you for this opportunity and privilege as we lay the foundation for a lifetime of school success!

Sincerely yours,

AMS

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- 600 Gorge Road
  Clidffside Park, NJ 07010
  (201) 840-1703
- 8 Adelaide Place
  Edgewater, NJ 07020
  (201) 224-6603
- 2825 Woodbridge Ave.
  Edison, NJ 08817
  (732) 494-4111
- 106 70th Street.
  Guttenberg, NJ 07093
  (201) 854-6176
- 10 Maple Lake Rd.
  Kinnelon, NJ 07405
  (973) 838-2122
- 192 Ramapo Valley Rd.
  Oakland, NJ 07436
  (201) 337-0183
- 75 East Ramapo Ave.
  Mahwah, NJ 07430
  (201) 512-1141
- 1339 Littleton Rd.
  Morris Plains, NJ 07950
  (973) 538-1276
- 5 Simpson Ave.
  Mt. Tabor, NJ 07878
  (973) 664-9797
- 470 Millbrook Ave.
  Randolph, NJ 07869
  (973) 328-7737
- 9 Waughaw Rd.
  Towaco, NJ 07082
  (973) 331-8141
- 1219 Ratzer Rd.
  Wayne, NJ 07470
  (973) 694-9140
- 950 Preakness Ave.
  Wayne, NJ 07470
  (973) 790-8641
- 25 Nevins Rd.
  (Next to Ice Vault)
  Wayne, NJ 07470
  (973) 696-9750
- 836 Macopin Rd.
  West Milford, NJ 07480
  (973) 208-1717

Visit our website:
www.applemontessorischools.com

Dear Apple Montessori School Parents,

The first six years of your child's life are critical. They learn the easiest and fastest compared to any other time in their lives. Studies have now proven that during these early years, synapses between neutrons are being "wired". Increasing your child's synapses has been proven to increase your child's I.Q.!
What is also most startling to learn is that during this time of critical brain development, what your child does not use or develop will be lost forever!

Apple Montessori and Fastracks combined together can help your child reach their fullest potential! Please read on and see how teachers, parents, and directors have seen first hand how FasTracks benefits our children.

A FasTrack enrichment program is offered here at Apple Montessori Schools. Feel free to sit in on a class as a lesson is delivered via the FasTrack learning station, observe as the children interact with the Smart Board and follow up with a hands on activity. Follow your child's progress as he or she develops basic knowledge, critical thinking skills, and the gift of public speaking.

Thank you for allowing us to develop a lifetime of school success for your child!

Warmest Regards
AMS

Independent Research
Outcomes-Based Evaluation of FasTracKids and Three to Six year olds
U.S. Sites

Dear Parents,

For years, FasTracKids parents, teachers and directors have seen firsthand the impact of FasTracKids programs on children. We've seen children become more skilled at communication, build their vocabulary and develop their self-confidence. We've watched them creatively solve problems and master challenges. We've seen how our children have demonstrated positive leadership behaviors within the classroom, at home and on the playground. We wanted quantitative analysis to support these findings.

The primary goal of this research project was to conduct an outcomes-based study that measured the improvement in children's vocabulary scores and social skills scores through their participation in FasTracKids. The reason that these areas were chosen is the research shows that basic skills such as teamwork, problem-solving and communication are prerequisites to learning success for young children.

The integrity of this research was to paramount importance to FasTracKids. Therefore, we engaged the National Institute of Out-of-School Time (NIOST) at the Wellesley Centers for Women at Wellesley College in Massachusetts to conduct the study. NIOST is a leading international center for research, evaluation, and training focused on the out-of-school hours.

The tools used in the study were standard assessment tests that have been used with thousands of children. Our children's results were compared to same age students (age-normed) who had previously taken the tests. We administered the Peabody Picture Vocabulary Test (PPVT) and the Expressive Vocabulary Test (EVT) to each of the children in the study. The PPVT is the leading measure of receptive vocabulary and a screening test of verbal ability and the EVT is a test of expressive vocabulary and word retrieval. Parents and teachers completed the Social Skills Rating Scale (SSRS). The SSRS provides a comprehensive picture of social behaviors that can affect relationships, peer acceptance, and academic performance.

Children were given pre-tests in the fall of 2007 and post-test in the spring of 2008, approximately a six-month span. Each of the tests is designed to measure the change within the children taking into account the natural growth and development that occurs within a child during the six-month time frame.

Seven FasTracKids sites participated in the study of the United States. These sites represented a range of demographics and socio-economic factors. As an example, family incomes ranged from $20,000 to more than $200,000. Among parents, 55% had reported that their highest level of education was a Bachelor's degree, 31% had completed advanced degrees.

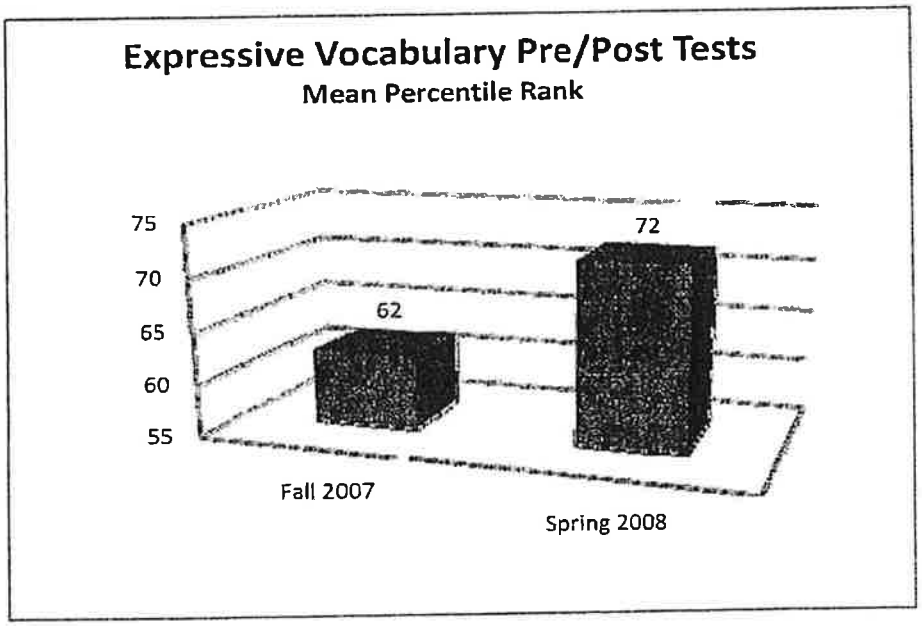
The Results

Independent testing demonstrates that a significant number of three to six year old children enrolled in FasTracKids improved their vocabulary and social skills at a rate 100% to 150% times faster than their peers not enrolled in the program. All children in the study improved – those who were kindergarten-aged advanced as much as one grade level and some of those students improved up to two grade levels.[1] All of the children attended FasTracKids classes for just two hours a week for a period of six months. Research shows that how children perform on these tests prior to entering school is a direct link to how they will perform in school throughout their academic careers.[2]

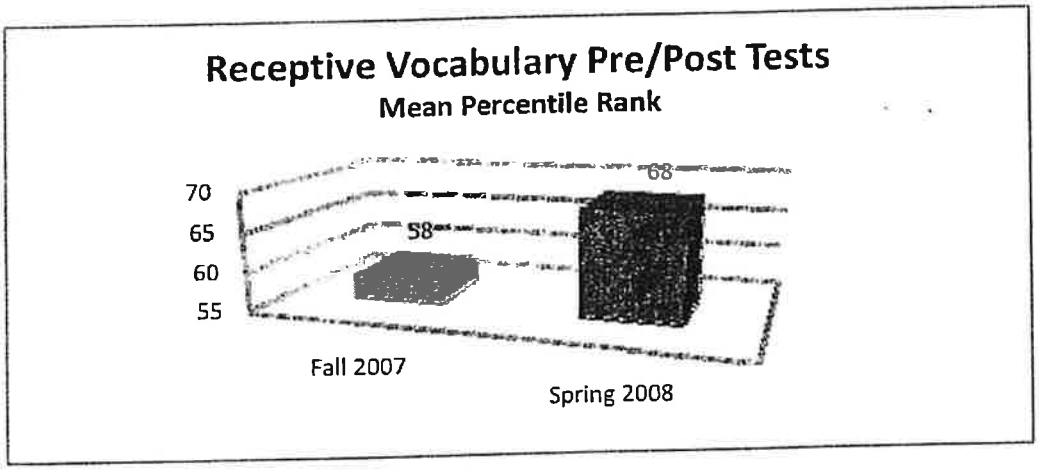
Additional Significant Study Findings:

1. FasTracKids' unique curriculum helps students of all skill levels achieve greater success.[3]
    a. Results confirm that students who enrolled in FasTracKids with lower - than - average skills demonstrated significant improvement in their receptive and expressive vocabulary skills.
    b. High - performing children, those who entered FasTracKids with above average skills, also demonstrated significant positive growth during the test period.

2. Children increased their expressive (speaking) vocabulary by 10 percentile points in a six-month time period. Because children's results are compared to children their own age, children typically don't change their percentile ranking from pre-test to post-test without significant intervention. FasTracKids improved their expressive vocabulary at a rate faster than their age peer group.[4]

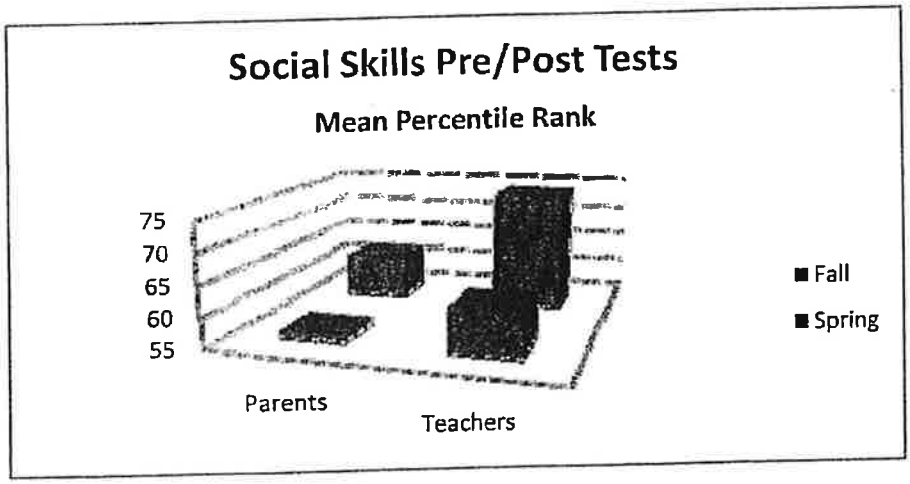


3. Children increased their receptive (or hearing comprehension) vocabulary by 10 percentile points in a six-month time period. Because children's results are compared to children their own age, children typically don't change their percentile ranking from pre-test to post-test without significant intervention. FasTracKids improved their receptive vocabulary at a rate faster than their age peer group.[5]



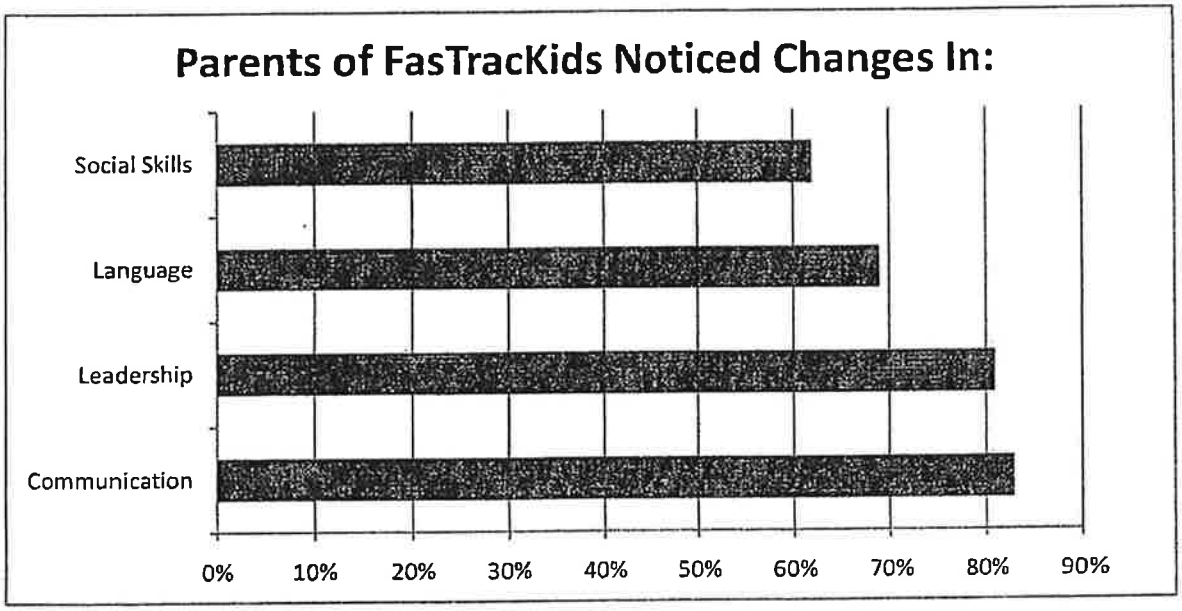
4. FasTracKids is proven to be effective within a population of children who come from homes in which English is a second language (ESL). ESL students exhibited significant improvement in all three learning categories that were studied: receptive vocabulary, expressive vocabulary and social skills.[6]

5. FasTracKids children exhibited improved social skills measured by their level of cooperation, assertion, responsibility, empathy and self-control.[7]



6. A survey accompanying the social skills assessment survey found that 76 % of parents report being very satisfied with their child's experience at FasTracKids. A majority of parents noted their children

improved most in communication (83 %), leadership and initiative (81%), language (69 %) and social *skills (62 %).*[8]



7. Children from a variety of environments – dense urban, urban residential, suburban center, and suburban residential – and with different family characteristics showed significant improvement in all three skills: receptive and expressive vocabulary; teacher-assessed social skills; and parent-assessed social skills.[9]

Why Is Vocabulary Important?

Years of research have shown that preschoolers' oral language achievements are critically linked with short- and long-term reading, academic and social/relational achievements. Vocabulary acquisition is an important indicator of a child's linguistic and cognitive development, and readiness for formal schooling. Vocabulary bridges the word-level process of phonics and cognitive processes of comprehension. The connection with cognitive ability is that children with larger vocabularies are more likely to read widely, can learn more readily through verbal instruction in a wide range of domains or have a larger store of verbal concepts to call on as tools of thinking.[10]

The early years are the time of making connections – critical connections for pre-school-age children. Research shows that there is a reciprocal relationship between language development and early literacy. Children acquire important early literacy skills beginning at birth, and their success in 1st grade is largely dependent on how much they have learned before they start school.[11]

Studies have also shown a strong correlation between how well children perform on the EVT and PPVT in preschool years and their performance in 4th and 7th grades – five and eight years later.[12]

Why Are Social Skills Important?

Traditionally, there has been a focus on cognitive test scores - IQ, standardized tests, grades – to determine intelligence. Current research shows that non-cognitive abilities are required for success in

school and in life. Motivation, sociability, the ability to work with others, the ability to focus on tasks, self-regulation, and self-esteem all matter, and may be more important than cognitive "smarts" to predict success.[13]

References:

1 Addendum to Outcomes Evaluation of FasTracKids Final Report: Grade Equivalents, 2008
2 Home-School Study of Language and Literacy Development, 1987 - 1995
3 Addendum to Outcomes Evaluation of FasTracKids Final Report: Low/High Performers (PPVT and EVT), 2008
4 Outcomes Evaluation of FasTracKids - Final , 2008
5 Outcomes Evaluation of FasTracKids - Final , 2008
6 Addendum to Outcomes Evaluation of FasTracKids Final Report: Grade Equivalents, 2008
7 Outcomes Evaluation of FasTracKids - Final , 2008
8 Outcomes Evaluation of FasTracKids - Final , 2008
9 Outcomes Evaluation of FasTracKids - Final ,2008
10 Anderson & Freebody, 1981; Baumann, Kam'enui & Ash, 2003; Becker, 1977; Davis, 1942; Whipple, 1925
11 Carroll, 1993; National Institute of Child Health and Human Development, 2000; Beginning Literacy with Language, Dickson & Tabors, 2001
12 Beginning Literacy with Language, Dickson & Tabors, 2001; Home-School Study of Language and Literacy Development, 1987-1995
13 Schools, Skills, and Synapses, Heckman, 2008
14 Outcomes Evaluation of FasTracKids – Final, 2008

Supporting Research

Bowey, 1995
Catts, Fey, Tomblin & Zhang, 2002
Chaney, 1994
Fazio et al., 1996
Patrick, Yoon & Murphy, 1995
FujiM, Brinton, Morgan & Hart, 1999
Hart & Risley, 1995
Kamil & Hiebert, 2005
Heckman, Stixrud and Urzua, 2006

Dear Parents,

It's that time of year again. Registration for the 2013-2014 school year. **We will be opening our registration first to our current Apple Montessori School families with a return date of March 15th.** We will then open registration to all new families on March 16th. Please be aware that there will be a limited number of half day sessions available in each class. If we do not receive your application along with the proper fees by the due date listed above, we cannot guarantee enrollment or placement in your child's current preschool class.

For your convenience, please use this as a tool during your completion of the school application and all the paperwork attached. As you complete each form, please use each check off box to make sure you have signed and completed all the forms before returning them to the tuition department.

- ☐ Completed Application (front and back) initialed and signed by both parents/guardians
- ☐ FasTracKids Application signed by parent/guardian
- ☐ Student Authorized Release Form-complete and return with application
- ☐ Getting to know your child-complete and return with application
- ☐ AMS Tuition Policy Agreement-initialed and signed by both parents/guardians
- ☐ Photo/Transportation/Solicitation Form-initialed and signed by both parents/guardians
- ☐ Child's Immunization Form- supplied and updated by your child's physician ***state mandated for 1st day of school**
  *Edison/Metuchen student's must supply the Universal Child Health Record
- ☐ Medical Information Form-initialed and signed where needed by parents/guardians
- ☐ Daycare Registration Form-signed by parent/guardians
- ☐ **Please send (2) separate checks made payable to "Apple Montessori School". One check should include registration fee, supply fee, book fee (If applicable), FasTrack registration fee and daycare fees for unlimited or hourly daycare (if applicable). The second check should be for one month's tuition which will be applied to June 2014 and June 2014 FasTrack fee (if applicable). Please include your child's first and last name and the school location in the memo section of the check.**

***Your application will not be processed unless it is returned with all of the above. All documents must be signed and initialed in the proper areas by both parents/guardians. Any form missing a parent/guardians signature or initial will be returned to you and delay the enrollment process. Applications received without the proper fees will be returned to you.**

Please use the remittance envelope provided and mail all paperwork along with the deposit to:

Apple Montessori School, 170 Kinnelon Road-Suite 24, Kinnelon, NJ, 07405
Please make sure to write your child's first and last name along with their school location on check!

If you have any questions, please contact the tuition department below:

Cliffside Park: 600gorgerd@applemontessorischools.com
Edgewater: 8adelaidepl@applemontessorischools.com
Edison (Rt27): 1876route27@applemontessorischools.com
Edison (Woodbridge Ave): 2825woodbridgeave@applemontessorischools.com
Hoboken: 1055maxwelllane@applemontessorischools.com
Kinnelon: 10maplelakerd@applemontessorischools.com
Mahwah: 75eramapoave@applemontessorischools.com
Metuchen: 12centerst@applemontessorischools.com
Montville: 9waughawrd@applemontessorischools.com
Morris Plains: 1339littletonrd@applemontessorischools.com
Oakland: 192ramapovalleyrd@applemontessorischools.com
Randolph: 470millbrookave@applemontessorischools.com
Wayne: 25nevinsrd@applemontessorischools.com

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- 863 Macopin Rd.
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  (973) 208-1717

Visit our website:
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Apple Montessori School Application

I, _____, make application for the admission of _____ as a student at the Apple Montessori School of (school location) _____ for the academic term beginning _____ and ending _____.

Child's Name _____ Date of Birth _____

Gender _____ Home phone # _____

Street Address _____

City _____ State _____ Zip Code _____

Father/Legal Guardian _____

Social Security # _____ E-mail Address _____

Employer _____ Occupation _____

Work Address _____

Primary/Work phone # _____ Secondary/Cell phone # _____

Mother/Legal Guardian _____

Social Security # _____ E-mail Address _____

Employer _____ Occupation _____

Work Address _____

Primary /Work phone # _____ Secondary/Cell phone # _____

Sibling (s) (Name/Age) _____

Please indicate which name is required for flex spending _____

Student Last Name: _____ First Name: _____

Please mark which classroom you are enrolling your child in:

❑ Infants (INF) ❑ Toddler (TODD) ❑ Preschool (PRE) ❑ Kindergarten (K)

Please mark which session you are enrolling for:

❑ 8:30-11:30am (AM) ❑ 12:30-3:30pm (PM) ❑ 8:30-3:30pm (FD)

❑ Monday ❑ Tuesday ❑ Wednesday ❑ Thursday ❑ Friday

Please indicate which location you are enrolling your child in:

❑ Cliffside Park ❑ Hoboken ❑ Morris Plains ❑ Wayne (Preakness Ave.)

❑ Edgewater ❑ Kinnelon ❑ Mt. Tabor ❑ Wayne (Ratzer Rd)

❑ Edison (Woodbridge Ave.) ❑ Mahwah ❑ Oakland ❑ West Milford

❑ Edison (Route 27) ❑ Metuchen ❑ Randolph

❑ Guttenberg ❑ Montville ❑ Wayne (Nevins Rd)

I will be using the following:

❑ Before care (7:00-8:30am) ❑ Unlimited Daycare

❑ After care (3:30-6:30pm) ❑ Hourly Daycare (see daycare sheet)

When unable to reach a parent in case of emergency, I authorize the school to contact and/or release my child to the following individuals:

Name _____ Phone # _____ Relation _____

Name _____ Phone # _____ Relation _____

I give my consent for the school to contact my child's doctor for any required information:

Pediatrician's Name _____ Phone # _____

Dentist Name _____ Phone # _____

The school believes that a positive and constructive working relationship between the School and the student's parents or guardian is essential to the fulfillment of the School's mission. Thus, the School reserves the right to cancel this agreement or to not offer reenrollment if the School reasonably concludes that the actions of a parent or guardian make such a relationship impossible or seriously interfere with the School's accomplishment of its educational purposes. The decision of the School in this regard shall be final. _____ Parent/Guardians Initial's

As legal guardian, I hereby recognize that the Apple Montessori School is not responsible for injuries sustained while participating in school activities, therefore, forever release Apple Montessori Schools, its agents, servants and/or employees from any and all injuries and/or damages, including medical expenses suffered and/or incurred by my child while enrolled in the Apple Montessori Schools.

By signing below, I hereby agree that the School may take action that it considers prudent to protect the safety of my child and the other children visiting the premises. I further agree to indemnify, defend and hold the School (its owners, officers, directors, agents, employees, successors and its assigns) and AMS harmless from and against all actions, claims or liability (including attorney's fees and costs) directly or indirectly caused by my child or resulting from any inaccuracy or omission made by me in completing this Agreement or other information provided to the School. This waiver of liability is signed voluntarily as to its contents and intent. By signing below, I agree that, to my knowledge, all of the above stated information is accurate.

❑ **Yes, we have received, read and understand the AMS parent handbook and agree to abide by the school's policies as so described.**

Parent/Guardian signature _____ Date _____

Parent/Guardian signature _____ Date _____

**********FOR OFFICE USE ONLY**********

Check # _____ Amount $ _____ Reg Fee $ _____ Supplies Fee $ _____ June Deposit $ _____

Teacher _____ Hourly DC $_____ Unlimited DC $ _____ Siblings _____

Kinder/JC Book Fee $ _____ Fastracks Reg Fee $ _____ FT June Deposit $ _____ Tuition Policy _____

FASTRACKIDS ACADEMY REGISTRATION

Child's Name: _____ Date of Birth: _____

Child's Current Teacher: _____

School: _____

My child will begin FasTracKids for the month of: _____
FasTracKids will be offered during your child's school session. You will be notified as to the days and times.

Father/Guardian Name: _____ Work phone # _____

Mother/Guardian Name: _____ Work phone # _____

Home Address: _____ Home phone # _____

Emergency numbers to call:

Name: _____ Phone # _____

Name: _____ Phone # _____

I understand I am responsible for the entire session's tuition in which I enrolled whether or not my child is out due to illness or personal reasons. **Thirty (30) days written notice is required in order to withdraw from FasTracKids**. Verbal notice is not an acceptable form of termination. All withdrawals will be calculated the last day of the following month. FasTracKids registration is not refundable at any time during the year. FasTracKids tuition for the month of June is always collected upon registration, just like your school tuition. Please add FasTracKids fees in with your monthly tuition payment.

Parent Signature _____ Date _____

MONTESSORI SCHOOLS

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STUDENT AUTHORIZED RELEASE FORM

Child's Name: _____

Child's Teacher: _____

Please list below all individuals who are authorized to pick up your child. A photo I.D. will be required for these individuals to pick up your child and a copy of their ID's will also be kept on file in the office.

Name: _____ Relation to child: _____

Start Date: _____ End Date: _____

Name: _____ Relation to child: _____

Start Date: _____ End Date: _____

Name: _____ Relation to child: _____

Start Date: _____ End Date: _____

I do hereby authorize Apple Montessori Schools to release my child to the listed people. I release Apple Montessori Schools from any and all responsibility for issues that may develop when such persons take my child from the premises.

_____ _____

Parent/Legal Guardian Signature Date

_____

Print name of Parent/Legal Guardian

Getting to know your child... ☺ (Only complete if new student at Apple Montessori School)

Child's Name: _____ Birth Date: _____

Schools previously attended? _____

Reason for leaving previous school: _____

Why do you wish your child to attend AMS? _____

From what source did you learn of our school? _____

The Montessori preschool/elementary program is best as a 3 year experience. How would you rate your interest in staying for that kindergarten year?

_____ My child will attend the kindergarten program
_____ My child will attend public kindergarten
_____ I will consider the kindergarten program
_____ My child will attend another private school for the kindergarten year
_____ Yes, I am interested in Junior Class Grades 1-6

Has your child ever been referred for special services? _____

If yes, which services were recommended? _____

How much television does your child watch a day? _____

Does your child function at the level of other children in his or her age group? _____

Can your child effectively communicate his or her needs? _____

Does your child require any assistance at mealtime? _____

Previous experience being away from parents? _____

Previous group play experience? _____

Is your child toilet trained? _____ Any assistance needed? _____

Does he/she nap? _____ If so, when and how long? _____

Other children in family? (Please list each name, age & gender): _____
What method of behavior management is used in your home, and what is your child's usual reaction?

_____

Briefly describe your child's personality, including such things as your child's general temperament, social adjustment, special challenges and whatever else might be helpful to us:

_____
_____
_____

Does your child respond to his/her name? _____ Primary language spoken at home? _____

Does your child ever exhibit aggressive behavior such as hitting, kicking, pushing or biting? _____

If so, does he/she display empathy over the situation? _____

How does your child handle transitions (i.e. moving from one activity to another)? _____

_____

Parent/Guardian's Initials _____

MONTESSORI SCHOOLS

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PHOTO RELEASE _ (Parent Initials) _____

Yes, I (we) hereby grant permission to Apple Montessori Schools to use my child's photograph, video in official school printed publications, e-mails, podcasts, website or advertisements without further consideration, and I acknowledge the Apple Montessori Schools right to crop or treat the photograph at its discretion. I (we) also acknowledge that Apple Montessori Schools may choose not to use my photo at this time, but may do so at its own discretion at a later date.

I (we) hereby grant Apple Montessori Schools permission to use my likeness in photograph(s)/video in any and all of its publications and in all other media whether now known or hereafter existing, controlled by Apple Montessori Schools in perpetuity, and for other use by the school. I (we) will make no monetary or other claim against Apple Montessori Schools for the use of the Photograph(s)/and or video and reserve the right to discontinue the use at any time without prior notice.

SECURITY AND SURVEILLANCE CAMERAS (Parent Initials) _____

I (we) understand that in order to promote the safety of the children, staff and visitors as well as the security of its facilities, Apple Montessori Schools may conduct video surveillance of any portion of its premises at any time, the only exception being private areas of restrooms, dressing rooms, and that video cameras will be positioned in appropriate places within and around Apple Montessori School buildings and used in order to help promote the safety and security of people and property. I (we) hereby give my consent to such video surveillance at any time the school may choose.

TRANSPORTATION RELEASE

Permission is also granted to Apple Montessori Schools to take my child (full day legal Pre-K's and older) on field trips. An additional permission slip and fees will be due in advance of each scheduled trip.

This waiver of liability is signed voluntarily as to its contents and intent. As legal Guardian, I hereby recognize that Apple Montessori Schools are not responsible for transporting my child. I, therefore, forever release Apple Montessori Schools, its agents, servants and/or employees from any and all injuries and/or damages including medical expenses, suffered and or incurred by my child while being transported by any transporting or bus company utilized by Apple Montessori Schools.

SOLICITATION AGREEMENT

The parents of the students enrolled in the Apple Montessori Schools and Summer Camps are considered clients of the school. A working, professional relationship should be maintained at all times. As such, no employee may solicit a parent for services, nor, shall they accept solicitations from an Apple Montessori parent. This is to include, but shall not be limited to, babysitting and tutoring. In order to avoid any conflicts of interest, on behalf of both parties, we do not condone socializing with said clients outside of school business.

I certify that I have read, understand and accept all of the terms and conditions described in these policies.

Parent/Legal Guardian Signature _____

Parent/Legal Guardian Signature _____

Date _____ Relation _____

Child's Name _____ Teacher _____

APPLE MONTESSORI SCHOOLS

DEVELOPING THE FOUNDATION FOR A LIFETIME OF SCHOOL SUCCESS!

Apple Montessori Enrollment and Tuition Policy Agreement

STUDENT
LAST NAME: _____ FIRST NAME: _____

1. Apple Montessori School's enrollment requires an annual registration and supply fee and a deposit payment. The deposit payment due is in the amount one tenth of your annual tuition for each student. In addition, those children who are enrolled in Kindergarten will have an annual book fee due. If your child enrolls in Fastrack's or unlimited daycare, there is an additional required registration fee and an additional deposit payment due in the amount of one tenth of the annual Fastrack's and/or unlimited daycare tuition. These fees and deposit payment for Fastrack's and unlimited daycare are due with your application.
2. All fees listed in paragraph 1, as well as the deposit payment listed in paragraph 1, are **non-refundable**, except as provided below in paragraph 9.
3. One tenth of your child's full tuition for the school year is due on the 1st of each month. The first monthly tuition payment is due on September 1 and the last payment is due on June 1. You must pay each of these payments, except as provided in paragraphs 8 and 9, and the deposit payment will be applied to your child's tuition payment due on June 1, except as provided in paragraphs 8, 9 and 17. Monthly tuition payments will not be pro-rated for withdrawals from enrollment before the end of a calendar month.
4. A $50.00 late fee is assessed if payment is not received by the 1st of each month.
5. Your child may have the opportunity to participate in special programs or field trips. You may be charged fees in addition to the fees listed above in paragraph 1 for these special programs and field trips and additional forms including permission slips may be needed.
6. Monthly tuition payment statements are sent in advance of each month's tuition payment due date. You have 30 days from the tuition payment statement date to submit a written dispute to the Tuition Department. Attention: Tuition Director at Apple Montessori Schools, 170 Kinnelon Road, Suite 24, Kinnelon, NJ 07405. After 30 days from the date of a tuition payment statement, you will have waived any right to dispute that such tuition payment is due as shown on the tuition payment statement.
7. Tuition is not subject to proration for any reason and this includes but is not limited to illness, holidays, emergency snow closings or leaving the country for an extended period of time during the school year, family emergencies, or state and federal mandated state of emergencies.
8. Thirty day written notice is required for withdrawal of your child from enrollment in Apple Montessori. This written notice of withdrawal must be received by Apple Montessori by the end of the calendar month preceding your child's last calendar month of enrollment. If Apple Montessori receives between the period of August 1 and December 15, or the next business day thereafter if December 15 is not a business day, such written notice of withdrawal, Apple Montessori will apply the deposit payment to the next tuition payment that is or will come due after Apple Montessori's receipt of the written notice of withdrawal. If Apple Montessori receives after December 15, or the next business day thereafter if December 15 is not a business day, such written notice of withdrawal, you will remain required to pay the next tuition payment that is due, and you will have forfeited your deposit payment to Apple Montessori, and Apple Montessori will not apply the deposit payment to any month's tuition. For example, if Apple Montessori Schools receives a written notice of withdrawal on September 15, Apple Montessori will apply your deposit payment to the tuition payment due on October 1, and your child's last day of enrollment will be October 31. If Apple Montessori receives a written notice of withdrawal on December 16, you must pay the tuition payment due on January 1, and you will have forfeited your deposit payment, and your child's last day of enrollment will be January 31. Your child's last day of enrollment must be no later than the last day of the calendar month for which either Apple Montessori Schools has applied your deposit payment or for which you have paid.
9. However, if Apple Montessori Schools receives on or before July 31 written notice of withdrawal, your deposit payment, but not any other fee, will be refunded.
10. Apple Montessori will deem all written notices of withdrawal to take effect at the end of the next calendar month after Apple Montessori's receipt of the written notice. Written notices of withdrawal that request withdrawal at a later date than the end of the next calendar month after Apple Montessori receives the written notice of withdrawal will not effect such a withdrawal and instead will effect a withdrawal that will take effect at the end of the next calendar month after Apple Montessori's receipt of the written notice. For example, a written notice of withdrawal received on October 15, no matter whether the written notice requests withdrawal at the end of November or at the end of a later month, will effect a withdrawal as of November 30, and your child's last day of enrollment will be on November 30.
11. If you withdraw your child from enrollment in Apple Montessori Schools for any reason, Apple Montessori Schools does not guarantee that your child will be permitted to re-enroll.
12. Requests for any change in a child's program, for instance a change from the full-day program to the AM-only program, must be submitted to Apple Montessori Schools in writing, and any such change will only become effective on the 1st of the calendar month that starts 30 days or more after Apple Montessori Schools receives such written request. However, Apple Montessori Schools reserves the right to deny, in its sole discretion, such requests for any change in program or to delay the effective date, in its sole discretion, of any change in program.
13. Written notices and requests must be sent to the school location your child attends as well as a copy to: Attention: Tuition Director, Apple Montessori Schools, 170 Kinnelon Road, Suite 24, Kinnelon, NJ 07405. The written notice must include your reason for removing your child and must specify the last day of school your child is attending. Verbal notice of withdrawal, and verbal requests for changes in program, will not be accepted in any circumstance. You are responsible to ensure that Apple Montessori has received your written notices. If Apple Montessori has not received your written notice, as it may determine in its sole discretion, that written notice will not be effective.
14. Please make your checks payable to "Apple Montessori School" and indicate on the check YOUR CHILDS FIRST AND LAST NAME and SCHOOL LOCATION. The remittance address is: Apple Montessori School, ATTN: SCHOOL LOCATION, 170 Kinnelon Road-Suite 24, Kinnelon, NJ, 07405. Please use the remittance envelope provided to mail in your payment.
15. There is a $35.00 returned check charge assessed to all checks returned for nonpayment. A family is allowed 2 returned items per year, all payments after that must be made with cash, money order or credit card.
16. For your convenience, we accept tuition payments via Visa, Master Card, Discover or American Express. Please note there is a 2.9% convenience fee for these transactions. All charges are final; no disputes can be made with regards to the transaction. You have the option of having your credit card charged automatically the 1st of each month. You must complete a credit card authorization form for our files. You can download the form from our website www.applemontessorischools.com
17. If any tuition payment due is not paid by the due date, Apple Montessori Schools will have the right to remove your child from enrollment and to apply the deposit payment to any outstanding balances; however, upon payment, enrollment may, in the sole discretion of Apple Montessori Schools, be reinstated with applicable paid tuition and registration fee. Accounts in arrears may be referred to a collection agency. In the event an account is sent to collections, you will be responsible for the balance of your account and any reasonable collection and attorney fees and costs associated with the collection of the account.
18. Apple Montessori Schools reserves the right for disenrollment of any child without prior notice if, in the sole opinion of Apple Montessori School, it is in the best interest of the child or Apple Montessori School.

Parent/Guardian Initial's:_____

Infant/Toddler: Infant/Toddler families are responsible for a minimum of one month during July/August to hold your child's spot in class. The deposit paid with your application will be credited to June 2014. You will then have additional tuition payments due on July 1st and August 1st.

Daycare Policy:

Before Care (7:00am-8:15am) After Care (3:45pm-6:30pm) Aftercare begins at 3:45pm. You will be charged for one hour of daycare if your child stays any time between 3:45-5:00pm. Between 5:00-6:00pm is an additional hour and between 6:00-6:30pm will also be an additional hour.

Unlimited Daycare: If your child will stay for daycare on a regular basis there will be a daycare fee in addition to your monthly tuition, per child, for unlimited use of daycare services. There is no roll over for this service.

Hourly Daycare: Hourly daycare **MUST** be prepaid. See Daycare Plans available.

There will be a 10% discount given for the 2nd child.

Aftercare ends at 6:30pm. A fee will be charged for any child not picked up before the school's regular closing time. This charge shall be $6.00 per every 15 minutes. You will need to pay it in cash immediately to the daycare assistant upon picking up your child.

Please direct all billing inquiries or questions concerning Apple Montessori School's tuition policies to the Tuition Department.

Cliffside Park: 600gorgerd@applemontessorischools.com
Edgewater: 8adelaidepl@applemontessorischools.com
Edison (Rt27): 1876route27@applemontessorischools.com
Edison (Woodbridge Ave): 2825woodbridgeave@applemontessorischools.com
Hoboken: 1055maxwelllane@applemontessorischools.com
Kinnelon: 10maplelakerd@applemontessorischools.com
Mahwah: 75eramapoave@applemontessorischools.com
Metuchen: 12centerst@applemontessorischools.com
Montville: 9waughawrd@applemontessorischools.com
Morris Plains: 1339littletonrd@applemontessorischools.com
Oakland: 192ramapovalleyrd@applemontessorischools.com
Randolph: 470millbrookave@applemontessorischools.com
Wayne: 25nevinsrd@applemontessorischools.com

All persons financially responsible for the student named below must sign this agreement and return with the Enrollment Deposit Fees to the tuition department. This contract is binding upon those who sign below. Parents and/or guardians of the student named below shall be jointly and individually liable under this contract.

We also understand and agree that the school will not release our child's transcript or other records to any person, organization or school (including any other school at which our child may be enrolled at any time) whom we might request until all accounts to the Apple Montessori School are current and paid in full.

We certify that we have read, understand and accept all of the terms and conditions described in the "Tuition Policy Agreement."

Father/Legal Guardian Signature _____ Date _____

Mother/Legal Guardian Signature _____ Date _____

Child's Name _____ Child's Teacher _____

Medical Information

Child's Name

Special medical conditions _____
Chronic Illnesses _____
History of serious injuries or hospitalizations of which we should be aware _____
_____

Diabetes: ☐ Yes ☐ No
If your child has diabetes, please notify the School Director. Paperwork must be completed at enrollment.

Medication that will be administered regularly at the center _____
_____

Special dietary needs or restrictions: _____
_____

Physical restrictions _____
_____

Is your child able to fully participate in all of the activities offered by AMS? ☐ Yes ☐ No Explain: _____
_____

Medications _____ Reaction _____
Food _____ Reaction _____
_____
_____
_____
Respiratory _____ Reaction _____
Bee Sting _____ Reaction _____
Other _____ Reaction _____

Are any of the allergies severe or life-threatening? ☐ Yes ☐ No
If yes, please provide special instructions: _____
_____

☐ My child has a prescription epi-pen in case of allergic reaction. I will furnish completed AMS paperwork. I understand that it is my responsibility, not Apple Montessori Schools, to make sure that my child's epi-pen is always current and not expired.

☐ My child has a nebulizer. I understand that it is my responsibility to provide AMS paperwork completed by my child's doctor with written instructions as to when, how and how much to administer to my child.

Parent/Guardian Initials _____

Directors Initials _____

Medical Information (continued)

Child's Name

My child has been examined by a doctor within the last 12 months and attached are his/her immunization records.
Parent/Guardian Signature _____ Date _____

Schools in New Jersey are required to engage the services of a Nurse/Health Consultant to review health policies and procedures and children's records. My signature confirms my consent for review of my child's records by the nurse/health consultant during center visits.
Parent/Guardian Signature _____ Date _____

Individual state child care licensing regulations regarding medication must be followed. Any mandatory state form regarding administration of prescription or non-prescription medication must also be completed and signed by a parent/guardian.
If permitted by state child care licensing regulations, I authorize AMS staff to administer to my child topical non-prescription medications as needed, according to the dosage instructions on the medication container. For any other non-prescription medication, if permitted by state child care licensing regulations or school policy. I will provide written authorization for AMS staff to administer the medication in accordance with written instructions from the child's health care professional or me, as required. I agree to provide any such medications, as these will not be provided by the school. For any prescription medication, I will complete necessary authorization forms with my signature and understand the prescription label dosage instructions must be followed. I will provide the medication in its original container with the pharmacist's label.
Parent/Guardian Signature _____ Date _____

Prior to enrollment, I must provide the school with updated medical and immunization information for my child. This information must be updated in accordance with state child care regulations and kept current. I understand that children without appropriate current medical records may not attend the school.
I agree to promptly provide information to the school regarding any conditions, illnesses, allergies, or other special needs that may require specific care or attention and agree to provide additional documentation as needed.
If the school staff notifies me that my child is ill, I must pick up my child as soon as possible and no later than one (1) hour after being contacted.
If my child contracts a reportable contagious disease, my child may return only with a physician/health care professional's note indicating that my child is no longer contagious.
In case of a medical or other emergency while my child is under the school's supervision, I understand that AMS staff will attempt to contact me immediately; however, in the event that I cannot be reached, or when a delay would further jeopardize my child's health, I hereby authorize AMS to act on my behalf and to take the emergency measures including those listed below if deemed necessary by AMS staff or by medical authorities for the care and protection of my child. I authorize AMS to:

- Consult the physician or dentist named on the application if I cannot be reached.
- Administer first aid and/or cardiopulmonary resuscitation.
- Transport my child via ambulance or other emergency medical service to a local hospital or other urgent care facility, if deemed necessary by paramedics, police, or other emergency personnel.
- Obtain any emergency medical or dental treatment deemed necessary by medical authorities.
- Administer syrup of ipecac, if directed to do so by the Poison Control Center in case of accidental ingestion of a poisonous substance, except where prohibited by state child care licensing regulations.
- Transport my child to a local emergency shelter in the event of an emergency evacuation of AMS facility.

If I wish to request a religious or personal exemption to AMS practice of securing necessary emergency medical treatment in the event I cannot be reached, state child licensing authorities must be consulted to determine if such an exemption may be granted.
I must complete any state-specific medical authorization forms required by individual state child care licensing regulations.

Parent/Guardian Signature _____

Director's Signature _____

Dear Parents,

There are two daycare plans available for Before School Daycare (7:00am-8:15am) and Afterschool Daycare (3:45pm-6:30pm) which is unlimited daycare or hourly daycare.

Oakland Daycare Plans

Unlimited Daycare

If you purchase unlimited daycare, you may use as many hours each month as necessary for a monthly fee of $0. There is no roll over; it's over the end of each month. This would also cover late pick up with an afterschool activity. Unlimited daycare will be billed monthly and must be paid along with tuition by the 1st of each month.

Hourly Daycare

If you need hourly daycare, then **you must pre-purchase daycare hours**, which will follow you month to month. Hourly daycare fees are $5.50 per hour. You **MUST** purchase daycare hours in blocks of hours. The hours will follow month to month until they are used up at which time you will need to purchase more. Any accounts with past due daycare as of the 5th of the month, may result in the daycare service being refused.

If more than one child is using daycare, you may take a 10% discount off the second child.

Hourly daycare is billed hourly (i.e. 15 minutes, 30 minutes or 45 minutes in the room = 1 hour of billing, 1 hour 15 minutes, etc = 2 hours). If your child stays for an afterschool activity and is not picked up immediately following that activity, you will be charged for daycare from the time your child enters the daycare room until he/she is picked up.

Aftercare ends at 6:30pm. A fee will be charged for any child not picked up before the School's regular closing time. This charge shall be $12.00 per every 15 minutes. You will need to pay it in cash immediately to the daycare assistant upon picking up your child. You will be provided with a form with the amount. If we have not been in contact with a parent or guardian and the child has not been picked up within one hour of dismissal time, we are obligated to inform the State Division for Youth and Family Services and the appropriate authorities.

All daycare payments should be mailed along with your monthly tuition payments to:

Apple Montessori School, 170 Kinnelon Road-Suite 24, Kinnelon, NJ, 07405
Attn: (Please print school location)

If you will be using daycare hours and have not pre-purchased hours or paid the monthly unlimited daycare amount in full by the first of the month, there will be a $50.00 late fee posted to your account. Please call the school billing office with any questions.

Please complete the attached form and return to the school bookkeeper at the address listed above.

Tuition Billing Department:

Cliffside Park: 600gorgerd@applemontessorischools.com
Edgewater: 8adelaidepl@applemontessorischools.com
Edison (Rt27): 1876route27@applemontessorischools.com
Edison (Woodbridge Ave): 2825woodbridgeave@applemontessorischools.com
Kinnelon: 10maplelakerd@applemontessorischools.com
Mahwah: 75eramapoave@applemontessorischools.com
Metuchen: 12centerst@applemontessorischools.com
Montville: 9waughawrd@applemontessorischools.com
Morris Plains: 1339littletonrd@applemontessorischools.com
Oakland: 192ramapovalleyrd@applemontessorischools.com
Randolph: 470millbrookave@applemontessorischools.com
Wayne: 25nevinsrd@applemontessorischools.com

Hoboken: 1055maxwellland@applemontessorischools.com

Daycare Registration Form *please complete and return to school*

Child's Name

School Location Oakland

Teacher's Name _____

Please check off below which plan you are will be using this school year so that we can bill you accordingly.

_____ Morning Daycare (7:00am-8:15am) _____ Afternoon Daycare (3:45pm-6:30pm)

Unlimited Daycare: Included in Full Day tuition only.

Hourly Prepaid Daycare:

_____ 5 Hours =$27.50 _____ 10 Hours=$55.00 _____ 15 Hours=$82.50

_____ 20 Hours=$110.00 _____ 25 Hours=$137.50 _____ 30 Hours=$165.00

Unlimited daycare is billed with your monthly tuition and is due by the 1st of the month. Hourly daycare requires a prepayment on account based on your estimate of usage in hourly blocks. If daycare is not paid timely, you may be subject to a late fee and if necessary, you will no longer be eligible to utilize the daycare program.

I understand that the school reserves the right to deny, cancel, sever, or suspend a child's enrollment at any time the School, in its sole discretion deems, such action to be in the best interest of the child or the School. In such event, any unused daycare or portion thereof will be refunded. I understand aftercare ends at 6:30pm and that a fee will be charged for my child if he/she is not picked up before the School's regular closing time. This charge shall be $12.00 per every 15 minutes. I understand that I will need to pay it in cash immediately to the daycare assistant upon picking up my child. If the school is unable to contact me and my child has not been picked up within one hour of dismissal time, I understand that the school is obligated to inform the State Division for Youth and Family Services and the appropriate authorities.

_____

(Parent Signature) (Date)