FOR OFFICE USE ONLY

DATE RECEIVED _____

ENROLL DATE _____

ROOM/GRADE _____

BIRTH CERT. ATTCH. Y or N

MARSS # _____

Bluffview Montessori School

1321 Gilmore Avenue
Winona, MN 55987
507-452-2807

2023-2024

CHILDREN'S HOUSE APPLICATION FORM

STUDENT INFORMATION

Student Last Name (Legal Name) _____ Student First Name _____ Student Middle Name _____

Parent's Last Name _____ Parent's First Name _____

Address _____

City _____ State _____ Zip _____

Home Phone # _____ Cell Phone # _____

Email _____

Please indicate program

5 Full Days (M-F)	**3 Full Days (M, W, F)**	**2 Full Days (T, Th)**	**5 Half Days (M-F 7:45-10:45)**
$615.00/mo	$395.00/mo	$275.00/mo	$400.00/mo

After School Care will be available for Pre-K students from 2:15 until 5:00 at a rate of $5.00/hour. This program is capped at the first 20 students who apply. Please indicate the **days and pick up times** you prefer:

Monday_____ Tuesday_____ Wednesday_____ Thursday_____ Friday_____

In compliance with Federal Law, Bluffview Montessori School administers all education programs, employment activities and admissions without discrimination against any person on the basis of gender, race, color, religion, national origin, age, or disability. Inquiries regarding compliance with Title IX of the Education Amendments of 1972, which prohibits discrimination on the basis of sex in education programs or activities, may be referred to the District's Title IX Coordinator at 507-452-2807 or to the Office for Civil Rights, United States Department of Education

Bluffview Montessori

PRIVACY NOTICE (Tennessen Warning)

In accordance with the Minnesota Government Data Practices Act, Bluffview Montessori School ("Bluffview"), is required to inform you of your rights as they pertain to the information we collect about you. Bluffview is asking for this private information so that it can fulfill your request to enroll your student at Bluffview.

The information we collect from you may be used for one or more of the following purposes:

- Create a student file;
- Evaluate the student's eligibility to attend Bluffview;
- Fulfill state and federal reporting requirements;
- To assist your student in the event of an emergency;

You are not legally required to provide the information Bluffview is requesting, and you may refuse to provide some or all of the information requested. However, if you do not provide the requested information, Bluffview may not be able to process the enrollment application. Failure to provide certain information could result in delays, incorrect enrollment, or cause your student to not be enrolled.

With some exceptions, unless you consent to further release of private information, access to this information will be limited to individuals whose jobs reasonably require access to this information and school officials with an educational need to know.

Your student's information may also be released pursuant to a valid court order or a statute specifically authorizing access to the information. Other entities that may access your student's information include:

- Education services providers;
- Entities providing special education and other student support services;
- Minnesota Department of Education;
- Law enforcement and the juvenile justice system;
- State or legislative auditors.
- Other entities if required by a court order or authorized by state or federal law

The information on this form applies to any subsequent requests for information made during the application and enrollment process.

I have read and fully understand the above Privacy Notice.

_____ _____

Signature Date

_____

Printed Name