

www.Hershey-Montessori.org

Huntsburg Campus Application

ADOLESCENT COMMUNITY

Admissions: 11530 Madison Road • Huntsburg, OH 44046 • Phone: 440.636.6290 • Fax: 440.636-5665 Email: rdill@Hershey-Montessorl.org

APPLICATION FOR ENROLLMENT FOR SCHOOL YEAR

PRINCIPAL / DIRECTOR, TEACHER RECOMMENDATION

The applicant named below is applying for admission to The Adolescent Community of Hershey Montessori School. The community is a unique opportunity for study, work, and living. Though guided by responsible and trained adults, students will be responsible for managing the household, cultivating the land, operating small businesses, caring for plants and animals, and running a small farm. These activities, integrated with academic studies, make for an intensive community. The candidate has indicated she/he is interested in the adolescent community and is up to the challenging and encompassing nature of the community. Your answers to the following questions will help us evaluate the likelihood that the applicant's experience will be positive. Please be frank in your answers.

APPLICANT'S NAME: _							
Please comment on the applicant's following attributes:	OUTSTANDING	EXCELLENT	GOOD	AVERAGE	FAIR	POOR	N/A
Trustworthiness							
Cooperation							
Consideration of Others							
Independence							
Self-Direction							
Teamwork							
Creativity							
Intellectual Interests							
. How do you assess the	he applicant's ac	ademic achievei	ment in relati	on to ability?			
2. Describe the applican	t's emotional mat	urity in relation (to his/her peer	rs.			



Hershey Montessori School does not discriminate on the basis of gender, race, creed, ethnic or national origin, religion, disability, age, or sexual orientation in its admissions policy, financial aid program, or other educational policies.



3. Describe the applicant's character and sense of responsibility.

PRINCIPAL / DIRECTOR, TEACHER RECOMMENDATION (CONTINUED)

	ribe any notable disciplinary issues you have encountere	d with the applicant in the past two years.
		applicant for admission: ildly
	r's Name and Title:	
	Name:Address:	
Country:		Postal Code:
	NY 1	
Telephon	e Number:	

Thank you for completing this evaluation. Your comments are important in helping us gain a better understanding of the candidate. If you have any questions about this form, or about The Adolescent Community of Hershey Montessori School, please feel free to contact us.



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