

# Tree of Life Charter School

A Montessori Public Charter School

PO Box 966 (241 Ford Rd.)

Ukiah, CA 95482

707/462-0913 FAX:707/462-0914

treeoflifeschool@pacific.net

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## Enrollment Application

I/We submit this application for enrollment to Tree of Life Charter School for the child whose name appears below.

I/We understand that Tree of Life Charter School is a public charter school using the Montessori Method of education. As an integral part of the educational program, I/we understand that participation in parent education programs and family service to the school community is expected.

I/We understand that Tree of Life Charter School is not structured by traditional grade levels, but by human developmental levels. The decision to move a student to the next level is made jointly by student, parents, and staff.

I/We understand that each student works at a pace and level uniquely suited to that student's capabilities and potential—not in comparison to others. No labels of "gifted" or "disabled" will be used. Each student, with parents and staff, sets individualized learning goals and objectives that build on the student's capabilities and strengthen less developed areas.

I/We understand that curiosity and enthusiasm are the inner motivations for each student's exploration of the universe. Grades, competitions, rewards, and punishments will not be used to manipulate motivation at school.

I/We understand that the student's primary environment is the home. For the optimum development of our children, home and school must jointly offer children environments with many opportunities for developing physical abilities, social skills, intellectual curiosity, emotional awareness, and spiritual connection. I/We understand that parent education programs and materials will be available from the school to coordinate this effort, and that it is my/our responsibility to work on providing a beneficial home environment.

I/We understand that parents and staff are co-learners along with our children at Tree of Life Charter School.

Child's Name: \_\_\_\_\_

Child's Date of Birth: \_\_\_\_\_

Child's Previous School/Dates of Enrollment: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date of Application: \_\_\_\_\_ Phone # \_\_\_\_\_

Mailing Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

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## Family Information

### To be completed by parent or guardian

The information you provide for us on this form will help our staff to have a better understanding and relationship with your child, and it will help us know what resources we have available within our community.

### CHILD

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Child's First Name	Nickname	Middle Name	Last Name
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Date of Birth	Birthplace	Gender
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Please tell us about your child's birth (home, birth center, or hospital; any complications during pregnancy, delivery, or post-partum; people in attendance; was child born prematurely, on time, or late; etc.):

Please tell us about your child's temperament (sociable; easy-going; slow to warm up; stubborn; cries easily or often; quiet or loud; clingy or independent; any fears; etc.):

### **Please tell us about your child's development:**

Began crawling/creeping:

Began walking:

Any locomotor difficulties/delays:

Began saying words:

Began talking:

Any speech or language difficulties/delays:

Began toilet-training:

Completed daytime toilet-training:

Completed night toilet-training:

Any toileting problems?

### **Please tell us about your child's health:**

Allergies, diagnosed or suspected:

Vision:

Hearing:

How often does the child get colds, flu, or ear infections?

Has the child had any surgeries, hospitalization, broken bones, serious accidents?

Does the child get respiratory distress (asthma, bronchitis, etc.)?

Does the child have any restrictions?

## Family Information p. 2

### PARENT/GUARDIAN 1

\_\_\_\_\_  
Name

\_\_\_\_\_  
Home Address  
\_\_\_\_\_

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Business Phone

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
Occupation

Hobbies, Skills, Talents:

Can you share information or items from a foreign country, another culture, or a religion?

Can you drive on field trips?

Can you accompany a class on an overnight field trip?

Do you have a pick-up truck?

Can you do grounds maintenance?

Can you do carpentry, electrical, or plumbing work?

Can you fix or diagnose computer problems?

Can you work with children during school hours in the garden?

Can you work with children during school hours on special projects?

Are you willing to make reminder phone calls to parents/guardians?

Are you willing to do the collection and paperwork for a fundraiser?

### **Siblings**

Please list names and dates of birth of brothers and sisters, and state whether or not they live with the child:

### **Grandparents and others**

Please tell us about grandparents or other persons who are close to your child or who may be living with your family:

### PARENT/GUARDIAN 2

\_\_\_\_\_  
Name

\_\_\_\_\_  
Home Address  
\_\_\_\_\_

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Business Phone

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
Occupation

Hobbies, Skills, Talents:

Can you share information or items from a foreign country, another culture, or a religion?

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### **Family Information p. 3**

Who, besides yourself, is entrusted with the care of your child?

Have there been any recent changes in your child's life (new family member, location change, childcare provider change, loss of family member, etc.)?

What form of discipline is your child use to?

What activities do you do as a family?

Does your child watch television, videos, or movies? If so, how many hours per week? Please list the types of shows your child views.

What are your child's favorite activities to do at home?

Is your child involved in any activities outside of school?

Describe your child's daily routine:

### **SCHOOL**

How did you learn about our Montessori school?

What are your expectations of a Montessori school?

What are your child's previous schooling and education experiences—places, approximate dates, and was it a positive or negative experience?

What specific academic or social goals do you have in mind for your child regarding school?

What questions do you have about Montessori education or about our school?

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## Parent/Guardian Participation

Tree of Life Charter School is a community of families actively working to provide the best quality of life to all of its members. As adult members of this community, parents/guardians have the responsibility of protecting and nurturing the children. To this end, there are two ways by which parents/guardians are expected to participate in School activities: 1. Parenting and family support and information meetings ("Parent Council"); and 2. Parent/guardian and family service to the School.

### Parenting and Family Support

We are striving to provide the best for our children, so we must continue our efforts to improve our parenting skills and our family time. This school is not only for the children students, but also for their parents/guardians as students. Learning is a life-long activity. The best way to demonstrate this to our children (since parents are the first educators) is to continue learning and improving ourselves.

A goal of this school is to educate and support parents/guardians so that the children will have the optimum opportunity for development both at home and at school. To accomplish this, Tree of Life Charter School will have a variety of Parenting and Family Support activities, such as lectures, discussion groups, workshops, and family gatherings. We can only meet this goal if all families participate!

We understand that there are occasionally calendar conflicts or illness that might prevent attendance at a Parenting and Family Support activity. In that event, we will have written material, audiotape, or videotape that can be studied by the parents/guardians who could not attend.

**I/We understand that parent/guardian attendance and participation is expected at Parenting and Family Support activities at Tree of Life Charter School. I/We will do my/our best to attend and participate in all activities. If I/we cannot attend an activity, I/we will take responsibility for my/our own education by studying the written or recorded material from the activity that was missed.**

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Signature of Parent(s)/Guardian(s)

Date

**Parent/Guardian Participation p. 2**

**Service to the School**

Service to the school community is another aspect of the children’s curriculum that can be modeled by its adult members. Tree of Life Charter School gratefully acknowledges all of its members who volunteered time, energy, and skills to initially organize and create it! It will grow more beautiful through the years as each family adds its own energy to its growth. By participating in service to the school, you become a part of the school’s structure and involved in a practical way in your child’s education.

It is expected that most parents/guardians will enthusiastically want to help the school in whatever way they can. Please indicate below in which areas you feel your expertise and time can best be put to use. Thirty (30) hours per year are expected per family.

**I/We understand that each family with a child enrolled at Tree of Life Charter School is expected to give thirty (30) hours of service per year to the school. School service jobs will be posted at the school and noticed in newsletters. Parents/guardians may be telephoned and asked to help with service jobs. I/We have indicated below the jobs for which I/we feel qualified and will make time to perform.**

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Parent(s)/Guardian(s) Signatures	Date
<input type="checkbox"/> Fundraising coordinator	<input type="checkbox"/> Field trip driver/chaperone
<input type="checkbox"/> Gardening with students	<input type="checkbox"/> Lawn/yard maintenance
<input type="checkbox"/> Carpentry repairs/additions	<input type="checkbox"/> Plumbing repairs/additions
<input type="checkbox"/> Electrical repairs/additions	<input type="checkbox"/> Painting walls, ceilings
<input type="checkbox"/> Deep cleaning classrooms/office	<input type="checkbox"/> Window cleaning
<input type="checkbox"/> Bathroom cleaning	<input type="checkbox"/> Computer technician
<input type="checkbox"/> Sewing	<input type="checkbox"/> Inventory/organize library
<input type="checkbox"/> Making telephone calls	<input type="checkbox"/> Event coordinator
<input type="checkbox"/> Board member	<input type="checkbox"/> Child care during meetings
<input type="checkbox"/> Classroom project helper	<input type="checkbox"/> Event set up/clean up
<input type="checkbox"/> Other:	

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## Student Information

**To be completed by the student (students not yet reading/writing may be interviewed and have adult write their responses)**

### **Home Life**

1. What are your responsibilities at home that pertain to taking care of yourself (getting dressed, brushing teeth, washing clothes, etc.)?
2. What are your responsibilities at home that pertain to helping your family?
3. Do you have pets for which you are responsible? If so, what kind of pet and what are your duties?
4. What activities do you like to do at home?
5. How do you usually spend your time at home?
6. Do you receive an allowance or spending money? If so, do you earn it by doing special jobs, or do you receive it whether you do jobs or not?

### **School Life**

7. Where did you go to school before Tree of Life Charter School? Did you enjoy that school?
8. What activities do you like to do at school?

## Student Information p. 2

9. What activities do you do well at school?

10. What activities were most difficult for you at school?

11. What would you like to learn next?

12. What do you want more help with?

13. Have you ever done research or reports on subjects that you chose because you wanted to find out something? If so, what were your favorites?

14. In this school students have the freedom to set their own goals and make decisions about what they want to study. Have you ever done this before? How do you think you will do?

15. In this school students are excited about learning and do not need grades or competition to get them to learn better. What do you think about this?

16. In this school students and staff decide together about rules of respect and responsibility. Have you ever done this before?

17. Do you have any questions about this school that haven't been answered?

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Student Signature

Date