



MONTESSORI TRAINING CENTRE OF BRITISH COLUMBIA

#200 - 8555 Cambie Street Vancouver, B.C. V6P 3J9 Canada 604-261-0864 Fax: 604-261-2805

E-Mail: montessoritraining@telus.net Website: www3.telus.net/montessori

A.M.I. Assistants to Infancy Summer Course (Birth to 3)

Application for the Summer 2009 - 2010

NAME _____
Family First Middle

ADDRESS _____
Number Street

City Province Postal Code Country

TELEPHONE _____
Home Business or cell phone

FAX _____ E-MAIL _____

1. EDUCATION

Secondary School _____ Year _____

University/ College/ Community College	Dates Started and Ended	Degree/Diploma granted	Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Montessori Training:

Name of Institution	Affiliation	Diploma Granted	Date Awarded
_____	_____	_____	_____
_____	_____	_____	_____

2. STATUS IN CANADA

Canadian Citizen _____

Permanent Resident _____ Student Visa _____ Country of Citizenship _____

3. STATEMENT OF PURPOSE

THE APPLICANT IS ASKED TO RESPOND TO THE FOLLOWING, in a brief but substantial manner, on a separate sheet:

- a) *How did you become interested in Montessori Education?*
- b) *What is your purpose in taking the Assistants to Infancy Course?*
- c) *If you have worked with children, please describe your experiences.*

4. REFERENCES - Send one blank reference form to each.

They can give the completed reference form in a sealed envelope to you to include it with your application OR you can provide the references with a stamped, addressed envelope so he/she can send it directly to the Montessori Training Centre of BC.

Please provide full name, phone number, e-mail address and complete address of your references. You must include:

- a) one former instructor, teacher or professor
- b) one employer
- c) one family friend who has known you for several years.

1. _____
Name Address

City Province/State Postal Code Telephone Fax

E-Mail: _____

2. _____
Name Address

City Province/State Postal Code Telephone Fax

E-Mail: _____

3. _____
Name Address

City Province/State Postal Code Telephone Fax

E-Mail: _____

TO SCHEDULE THE INTERVIEW, THE APPLICATION PACKAGE MUST INCLUDE:

1. Curriculum Vitae/Resume
2. A non-refundable application fee of \$150.00 for Canadian applicants and \$250.00 for international applicants, payable to the Montessori Training Centre of B.C.
3. Official transcripts from the last educational institution attended where a degree/diploma was granted.
4. Three completed reference forms (include in application package or mailed directly to us.)
5. Statement of Purpose

I HEREBY APPLY FOR ADMISSION TO THE ASSISTANT TO INFANCY COURSE OF THE ASSOCIATION MONTESSORI INTERNATIONALE CONDUCTED BY THE MONTESSORI TRAINING CENTRE OF BRITISH COLUMBIA FOR THE SUMMERS OF 2009 and 2010.

Date

Signature of Applicant