

Montessori Elementary Program

CITY PARK SCHOOL

Saskatoon Public Schools' Montessori Elementary Program offers a Montessori education to students Grade 1 to Grade 8.

The Montessori pedagogy of 'following the child' allows individualized learning through respect of: stages of development, each child's natural desire to learn, their abilities, pace of learning, styles of learning and interests.

This program encourages each child to be an active, responsible, lifelong learner by fostering independence, self-determination and self-regulation at all levels. The uninterrupted extended work-cycle within a prepared environment allows the child to learn and practice these skills. In the multi-age classrooms, the children learn to work collaboratively with their peers; experience the benefits of moving from being mentored to mentoring, leading and role modeling for their peers; developing strong relationships with peers and teachers as well as the opportunity to set long term goals.

The Montessori Program for students Grades 6 to Grade 8 uses the local community and environment as a starting point to teach concepts in language arts, mathematics, social studies, science and other subjects across the provincial curriculum. This program emphasizes hands-on, real-world learning experiences enhanced by out-of-school excursions.

Montessori sparks a child's natural curiosity and love of learning that will expand beyond the classroom and into the future.

MONTESSORI PHILOSOPHY

- Independence and following the child
- Multi-age classrooms based on a 3-year cycle for the development of peer mentorship & strong relationship with peers and teacher
- Uninterrupted +2-hour work cycle
- The prepared environment and Montessori materials
- Foster global citizenship through Peace Education
- Practical Life: preparing children for life
- Emphasis on 'Grace, Courtesy & Respect'
- Cosmic Curriculum: enhancing wonder and curiosity
- Hands-on child-directed learning; minimal homework
- Montessori trained teachers with a SK teaching certificate.
- Sense of community
- Parental engagement

PROGRAM HIGHLIGHTS

- 2+ Hour Work Cycle
- Multi-Age Classes
- Cosmic Education
- Prepared Environment
- Montessori Program (Grade 6-8)

Before and After
School Program
available through
Maria Montessori



Saskatoon Public Schools
Inspiring Learning

saskatoonpublicschools.ca/montessori



Students who are not Canadian citizens must contact the
Newcomer Student Centre, 310 21st Street East, 306.683.8400

Cree Language & Cultural Program at Confederation Park School
French Immersion available at Alvin Buckwold, College Park, Forest Grove,
Henry Kelsey, Lakeview, River Heights and Victoria

Student's Legal Name		Birthdate			Gender	
Last Name		MMM	DD	YYYY	<input type="checkbox"/> Male	
First Name		Languages		First Language	<input type="checkbox"/> Female	
Middle Name				Second Language		
Usual or Called Name <small>If different from First Name</small>		Has Student Ever Been Registered With Saskatoon Public Schools?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Siblings currently attending this school		Previous School Attended		Previous School's Location		
Registering for Grade Lower <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 Upper <input type="checkbox"/> 4 <input type="checkbox"/> 5 Montessori <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8						

First Nations, Inuit and Métis (voluntary self-declaration)			
<input type="checkbox"/> First Nations Status	<input type="checkbox"/> First Nations Non-Status	<input type="checkbox"/> Inuit	<input type="checkbox"/> Métis
Reserve Name: _____			

Citizenship	Is the named student a Canadian citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, Citizenship: _____
<i>IF not Canadian citizen contact Newcomer Student Centre</i>	Country of Birth: _____
NEWCOMER STUDENT CENTRE USE ONLY	Last Country Student Attended School: _____
Proof of legal status must be provided in order to register (A copy will be placed in the student's cumulative folder.)	
<input type="checkbox"/> Permanent Resident - <input type="checkbox"/> Refugee Category	<input type="checkbox"/> Parent Work Permit Exp mmm/dd/yyyy _____
<input type="checkbox"/> Study Permit (International Student Program)	<input type="checkbox"/> Parent Study Permit Exp mmm/dd/yyyy _____
Signature of School Official Verifying document _____	

OFFICE USE ONLY	How was the student's name and birthdate verified?
<input type="checkbox"/> Birth Certificate <input type="checkbox"/> Passport <input type="checkbox"/> Status Card Other (Name Official Document) _____	
<input type="checkbox"/> Immigration Papers / Permanent Resident card	Signature of School Official Verifying document _____

STUDENT'S RESIDENCE		STUDENT'S CONTACT INFORMATION	
House Number	Apt # (if applicable)	Area Code ()	Phone -
Street		Email	
City	Postal Code	Area Code ()	Cell -
Province		Student Resides with	<input type="checkbox"/> Two Parents <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Joint Custody <input type="checkbox"/> Relative <input type="checkbox"/> Guardian

EMERGENCY / MEDICAL INFORMATION			
Who should be contacted first in the case of school closure or an emergency? (i.e. Mother, Father, Guardian)			
1.			
2.	Other Emergency Contact	Name	Phone () -
Doctor's Name		Phone () -	
Saskatchewan Health Card Number		_____	
Life Threatening Medical Condition(s) that requires regular medication or requires emergency medication that the school should be aware of.			
Other Medical Condition(s) that the school should be aware of.			

GUARDIANSHIP RIGHTS, CUSTODY OR ACCESS RIGHTS	Indicate if such document(s) exist: <input type="checkbox"/> Yes <input type="checkbox"/> No
Type of Legal Document: <input type="checkbox"/> Access and/or Custody <input type="checkbox"/> Parenting <input type="checkbox"/> Guardianship <input type="checkbox"/> Protection <input type="checkbox"/> Other _____	
Copy in Student Record: <input type="checkbox"/> Yes <input type="checkbox"/> No	Document Expiry Date (if applicable) _____
OFFICE USE ONLY (NOTES):	

First Parent/Guardian	<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Step Father <input type="checkbox"/> Step Mother <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other
Last Name	Address if different from Student
First Name	House/Apt #
Title <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr	Street
<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Other	City
Phone () -	Province Postal Code
Email	Employer
Cell () -	Employer Phone () -

Second Parent/Guardian	<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Step Father <input type="checkbox"/> Step Mother <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other
Last Name	Address if different from Student
First Name	House/Apt #
Title <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr	Street
<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Other	City
Phone () -	Province Postal Code
Email	Employer
Cell () -	Employer Phone () -

Third Parent/Guardian	<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Step Father <input type="checkbox"/> Step Mother <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other
Last Name	Address if different from Student
First Name	House/Apt #
Title <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr	Street
<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Other	City
Phone () -	Province Postal Code
Email	Employer
Cell () -	Employer Phone () -

Fourth Parent/Guardian	<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Step Father <input type="checkbox"/> Step Mother <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other
Last Name	Address if different from Student
First Name	House/Apt #
Title <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr	Street
<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Other	City
Phone () -	Province Postal Code
Email	Employer
Cell () -	Employer Phone () -

Employees of Saskatoon Public Schools may use the information collected on this form to help provide appropriate educational programming and support for the student.

We collect the student's Saskatchewan Health Number to use in case medical care is needed. This number, and other demographic information, is shared with Saskatchewan Ministry of Education to support the Student Data System. Contact information is collected and shared with the Saskatoon Health Region for follow-up with families regarding the following health services: immunization, vision screening, hearing screening, dental programs and transportation. How this information is accessed, used, or disclosed is protected under the **Freedom of Information and Protection of Privacy Act and the Local Authority Freedom of Information and Protection of Privacy Act.**

Declaration	I, the undersigned, hereby represent that I have the legal authority to register the child. I declare the information that I have provided on this form is complete and accurate. <i>I will notify the school of any changes to the information on this form.</i>
Date	Signature of Parent / Custodial Parent / Legal Guardian



MONTESSORI INFORMATION

Previous Montessori Education	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Montessori School	
Contact Information of Montessori School	
Length of Time and Dates	
Number of Siblings and Ages	

CONSIDERATIONS FOR ADMISSION

- Completion of application process
- Grade 1 students with or without prior Montessori experience
- Previous Montessori experience for Grades 2 – 8 is an asset
- Application process for Grade 6/7/8 Montessori Program
- Space limitations/class sizes
- Transportation is not provided

REGISTRATION PROCESS

1. Complete registration form and submit to City Park School
2. For families new to the Montessori educational experience:
 - Parents/guardians are invited to visit and observe a Montessori classroom
 - Child(ren) are invited to experience a Montessori classroom
 - Please phone 306.955.3852 or email mms.admin@montessorisaskatoon.ca to arrange for a tour/observation
3. Acknowledgement of the Montessori educational philosophy
4. Confirmation of acceptance to the program

MONTESSORI PROGRAM FEE*

Grade 1–5 \$100.00 (covers the cost of all school supplies)

Grade 6–8 \$130.00 (covers the cost of all school supplies and transportation for out-of-school Montessori program costs)

*Families are not required to purchase supplies during the school year

*Cheque payable to Saskatoon Public Schools

Application forms are available at saskatoonpublicschools.ca/Montessori
Please submit application forms to City Park School

For more information please contact: City Park School at 306.683.7550