



# Valley View Charter Montessori

## *Home of the Rattlers*

1665 Blackstone Parkway - El Dorado Hills, CA - 95762  
(916) 939-9640 or (530) 672-3890  
Fax: (916) 939-5015

### Montessori Verification Form

Parent/Guardian:

In order for your student to receive the Montessori experience admission preference for **2023/2024**, please have the director of your child's Montessori preschool/school complete the form below. Please note that the VVCM office staff will verify this information.

\_\_\_\_\_

Name of Montessori School: \_\_\_\_\_

Name of Student applying to VVCM: \_\_\_\_\_

Program/Grade Student was enrolled in: \_\_\_\_\_

Start and End Dates Student attended School: \_\_\_\_\_

**To the best of my knowledge, the information provided on this form is true and correct. I am a representative of the Montessori school and am authorized to submit forms on the behalf of the Montessori school's students.**

Name of Person completing form: \_\_\_\_\_

Position at Montessori School: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_

**VVCM Office Use Only:** Date Verified: \_\_\_\_\_ Staff Initials: \_\_\_\_\_