Registration No……………..

**APPLICATION FORM**

Full Name (in block letters)……………………………………………………………………………………………

Date of birth………………………………..Place and State…………………………………………………………

Married or Single…………………………..Number of children, if any…………………………………………

Father’s/husband’s name and occupation………………………………………………………………………..

Permanent address………………………………………………………………………………………………………..

………………………………………………………………………………………Tel. No…………………………………

Email address……………………………………………………………………………………………………………….

Local address (during the course)……………………………………………………………………………………

………………………………………………………………………………………. Tel. No………………………………..

Mother tongue …………………………Other languages you speak fluently,………………………………..

Read………………………………………….Write…………………………………………………………………………

**Education:**

Secondary School: …………………………………………………………………………………………………………

College (under graduate)……………………………………………………………………………………………….

 Subjects………………………………………………………………………………………………………………………

College (graduate)………………………………………………………………………………………………………..

Field of study……………………………………………………………………………………………………………….

Other studies……………………………………………………………………………………………………………….

**Experience:**

Teaching and other employment experience…………………………………………………………………….

If currently employed, where? …………………………………… Working hours…………………………….

How did you learn about the Indian Institute for Montessori Studies? …………………………………

What special qualifications do you bring to this training? Include interests and talents which may be related to your interest in Montessori……………………………………………………………………………………………..

…………………………………………………………………………………………………………………………………………………………

…………………………………………………………………………………………………………………………………………………………..

**Provide a hand-written Life sketch**

On a separate sheet please write a short statement incorporating the answers to the following questions:

Why do you want to take the Montessori Teacher Training Course?

How did you become interested in Montessori?

How do you intend to use your training?

**My consent:**

I hereby apply for admission to the Indian Institute for Montessori Studies and formally undertake to abide by the rules and conditions laid down in the prospectus.

**Signature……………………………………..Date…………………………Place………………………**

N.B. The application form duly completed should be submitted in person at the Indian Institute for Montessori Studies or sent by mail. If sent by mail it should be mailed to the following address:

IIMS, #640, 10th ‘B’ Main Road,4th Block, Jayanagar Bangalore – 560 011.

Applications will be received until enrollment has reached capacity, and thereafter a waiting list will be formed. Only 50 students will be admitted.

Application should be accompanied by:

* Two passport size photographs with name of the applicant on the back.
* An application fee of Rs.300/- by DD made payable to INDIAN INSTITUTE FOR MONTESSORI STUDIES
* A Xerox copy of High school/Higher Secondary school, college certificates along with mark sheets.
* All the copies of certificates attached to be provided.
* A Medical certificate of good health and fitness.
* Answer to the Questions mentioned in the application Form.

Any remarks…………………………………………………………………………………………….

NOTE: Applicants will have to appear for a personal interview. After the receipt of application the selected applicants will be informed about their selection and interview date. .Applications will be considered only if all the above conditions are fulfilled.

**To be filled in by the office:**

Admitted to the course………………………

Tuition fee paid Rs………………………….

Any remarks……………………………………………………………………………………………..