



Opus Montessori *School*

www.opusmontessori.org

Application Instructions

Please complete the application in its entirety to be considered for the 2024 school year. These scholarships are for a one-year, half-day program. All information will be kept strictly confidential within the selection committee. Students will be selected by lottery of approved applicants.

To qualify for the preschool scholarship lottery:

1. You must reside in Illinois School District 220
2. You must have a maximum household income of \$40,000 or less.
3. You must be willing to provide verification of income.
4. Must follow all Opus Montessori School rules and policies.

To be eligible, provide with application:

- Copy of Driver's License/ID card
- Proof of residency in School District 220 with copy of: utility bill, lease agreement or current voter registration card
- Proof of income with copies of last two pay stubs and 2023 tax return

Please drop-off or mail your application to:

Opus Montessori School
Attn: Bright Beginnings
180 Hawthorne Rd.
Barrington Hills, IL 60010

All applications must be received on or before 8/30/2024 (one application per child).

Lottery drawing on 8/31/2024. Scholarship recipients will be contacted by phone on 8/31/2024

If you need further assistance, please contact Mrs. Henderson-Garner at: 630-568-6787



Opus Montessori School
180 N. Hawthorne Road Barrington Hills, IL 60010 (630) 568-OPUS (6787)



Opus Montessori School

Bright Beginnings Scholarship Application

Child's Name _____ Date of Birth _____

Home Address _____
Street City Zip Code

Parent / Guardian Name _____

Occupation _____ Employer _____

Work Phone () _____ Home Phone () _____ Cell Phone () _____

Business Address _____
Street City Zip Code

Email _____

Parent / Guardian Name _____

Occupation _____ Employer _____

Work Phone () _____ Home Phone () _____ Cell Phone () _____

Business Address _____
Street City Zip Code

Email _____

Starting Date: 9/3/2024

PRESCHOOL PROGRAM (2 TO 5 YEARS OLD)

Half-Day Program: 7:00am - 12:30pm (2-5 yrs old)

School Days: Mon - Friday

Are there any unique family situations of which the school should be advised? Yes No

If yes, please explain _____





Opus Montessori *School*

p.2

Does your child have any special physical problems (allergies, etc.) or emotional problems? Yes No

If yes, please explain _____

Is your child receiving any treatment or medications regularly? Yes No

If yes, please explain _____

Has your child attended any other schools? Yes No

If yes, which schools? _____

Is there any additional information which would be helpful to us? _____

Opus Montessori School does not discriminate in admission or placement on the basis of race, creed, color, national origin or gender.

Parent or Legal Guardian Signature

Date

p.3

