

VOYAGER PARENT RESPONSE FORM

This page is to be filled out by a parent or guardian. If more space is needed, please feel free to attach another sheet of paper.

Applicant's Name _____ Applying to Grade _____

1. How have you heard about Voyager Montessori Elementary School? What attracts you to the school and what concerns do you have about your child attending the school?

2. Please describe your child's approach to new or challenging situations and frustrations.

(Be sure to complete the other side of this form.)

