



## THE CENTER FOR GUIDED MONTESSORI STUDIES

### Early Childhood Assistant Program Application

Please note: this application must be completed and submitted to [admissions@cgms.edu](mailto:admissions@cgms.edu) or faxed to 941-827-2981 to register for the Early Childhood Assistant program. *Incomplete applications or those submitted without payment will not be registered for the course.*

Today's Date: \_\_\_\_\_

Email address (please print or type): \_\_\_\_\_

Applicant Name (as it should be printed on certificate): \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Province: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

Are you currently working in a classroom? \_\_\_\_\_

If yes, please provide age level: \_\_\_\_\_

School name: \_\_\_\_\_

Please provide a brief statement about your work with children and Montessori.

---

---

---

---

---

Use this link to pay the course tuition of \$810.00 : [Assistant Course Payment](#)

If mailing a check, **please note that the postal service can take up to three weeks for CGMS to receive mail.** Course access is not provided until payment is received. Please mark the space below and mail payment to: CGMS, 4532 West Kennedy Blvd, Suite 233, Tampa, FL 33609.

\_\_\_\_\_ A check for \$810 is being mailed to the address above. I understand that I will not be able to begin the course until payment is received.

REFUND POLICY: Course transfer or refund may be made within the first week of the course.

Please contact [admissions@cgms.edu](mailto:admissions@cgms.edu) with questions about registering for the Early Childhood Assistant's Course.