



Montessori Center for Teacher Development
Application for Admission 2026

Last Name	First Name	Middle Name
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Preferred Name	Maiden Name	Last 4 Digits of Social Security #
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Street Address

City	State	Zip	Country
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Work Phone #	Home Phone #	Cell Phone #
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Email Address	License Plate #	Fax #
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Date of Birth (MM/DD/YY)	Gender
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Emergency Contact and Medical Information

In case of an emergency, please list the name and phone number for your contact.

Name of Emergency Contact	Relationship to Applicant	Phone Number
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Please list any medical conditions you have which MCTD should be aware of in case of an emergency: _____



Educational Background

High School	Graduation Date	City, State	Diploma
College	Graduation Date	Major	Degree
Graduate School	Graduation Date	Field of Study	Degree
Montessori Credential Program			Year
Other Studies/Workshops		Program	Year

Please supply two (2) sets of official transcripts from the school of your highest educational level completed to our office. These are required for admission. If your transcripts are from an educational institution that is located outside the United States, they must be evaluated by a U.S. evaluation service. We suggest you contact World Education Services.

For candidates without a bachelor's degree seeking an Early Childhood Associate Credential, please be aware that as local and state regulations for teaching qualifications vary, it is the applicant's responsibility to confirm his or her required qualifications for employment in the state/city where he or she will be seeking employment.

Employment Background

Present Employer	Position	From	To
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Job Description

Previous Employer	Position	From	To
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Job Description

Previous Employer	Position	From	To
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Job Description



Prior Teaching Experience

School	Position	From	To
<input type="checkbox"/> Check if this is a Montessori School			

School	Position	From	To
<input type="checkbox"/> Check if this is a Montessori School			

Other Experience Working with Children

Teaching Certificate (please send a copy to our office)

References

Letters of recommendation – 2 professional and 2 personal – are required for admission to our program. These should be written specifically for consideration of your admission to our program this year. Please list the names and information of the people who will be submitting recommendations to us on your behalf. By signing this application, you give MCTD the right to contact your references.

Professional Reference Name	Position/Title	Relationship to Applicant	Phone #
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Professional Reference Name	Position/Title	Relationship to Applicant	Phone #
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Personal Reference Name	Relationship to Applicant	Phone #
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Personal Reference Name	Relationship to Applicant	Phone #
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Practicum/Internship

Practicum/Internship Site (School Name)	Supervising Teacher
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Street Address	City	State	Zip
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Phone #	Fax#	Email Address	School Director
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School Affiliation:

- AMS
AMS Member School # () Expiration Date ()
- AMI
- Other _____

- I am interested in doing my Practicum/Internship at The Montessori Children's Academy.
- I do not have arrangements for a Practicum/Internship site.

If you do not have a Practicum/Internship site, please visit the AMS website www.amshq.org to view school listings for possible Practicum/Internship locations.

Additional Information

Upon completion of all AMS requirements, Adult Learners are recommended for an AMS Montessori Certificate/Credential. Please indicate how you prefer your name to appear on your certificate/credential:

Where did you hear about MCTD? _____

If you are not paying for 100% of your tuition, please fill out this section:

- I am applying at the request of _____ (name of school), where I am currently employed. The school **will** or **will not** be responsible for paying for my tuition and other fees. (If the school is paying part and the Adult Learner is paying part, please include a summary of your arrangement.)
- I will be seeking tuition assistance through: AMS MCTD Other _____

Are you proficient in English? _____

You are required to be proficient in the English language to be accepted for admission into our program, as classes are conducted in English and written work must be submitted in English. Adult Learners must be able to speak, understand, read, and write English to succeed in our courses. English proficiency is determined during the application process. Applicants who do not meet this requirement will not be accepted into the program.

While we require English proficiency, we do welcome a culturally and ethnically diverse community of teachers and Adult Learners. If you are fluent in other languages, please indicate which one(s): _____

Is there anything you would like us to know about your learning style that would enable us to better assist you during the course? _____



To Complete Your Application

1. Include your non-refundable Registration Fee. Applications are due May 1, 2026.

Registrations received after June 1, 2026 will be charged a \$100 Late Registration Fee **in addition** to the regular Registration Fee. Tuition and fees for the program are listed below. All tuition payments and fees are due in full by the dates listed below. Transportation expenses, books, and supplies are not included and are the responsibility of the Adult Learner. The cost of books and supplies is approximately \$300 – \$600 depending on the source. ***All checks should be made payable to The Montessori Children’s Academy.***

Tuition and Fees 2026 – 2027

Tuition:	\$7,550.00
Registration Fee:	\$200.00
Association Fee:	\$450.00
Total Fees:	\$8,200.00

Possible Additional Fees

Additional Late Registration Fee (after 6/1/26):	\$100.00
Late Payment Fee:	\$150.00
Self-Directed Internship:	\$1,000.00
Audit (per day):	\$200.00
Extra Field Visit (per visit):	\$200.00
One-year Extension:	\$350.00

Payment Schedule 2026 – 2027

5/1/26	Application and Registration Fee	\$200.00
6/1/26	1 st Payment	\$2,300.00
6/1/26	Association Fees	\$450.00
	(Total 6/1/26 -	\$2,750.00)
10/01/26	2 nd Payment	\$1,750.00
2/01/27	3 rd Payment	\$1,750.00
6/01/27	4 th Payment	\$1,750.00
	Total Payments	\$8,200.00



2. **Include four (4) current letters of recommendation (2 professional and 2 personal) and a copy of your teaching certificate (if you possess one).**
3. **Send two (2) sets of official transcripts from the school of your highest education level completed. If your highest degree is a high school diploma, send a copy of your high school transcript.**
4. **Complete and include the attached essay questions.**

MAIL ALL DOCUMENTS TO:

Montessori Center for Teacher Development
Attn: Admissions Department
286 Main Street
Chatham, NJ 07928

CANCELLATION BY APPLICANT: The Applicant may cancel this contract and receive a full refund of all monies paid to date if cancellation is made in writing and mailed to Montessori Center for Teacher Development, Attn: Admissions Department, 286 Main Street, Chatham, NJ 07961, postmarked within three (3) business days of the date of the signature on this application.

REFUND POLICY: If an Adult Learner withdraws from the program one month prior to the program starting date, 100% paid tuition (less registration fee) will be refunded. After the start of the program, allowable refund percentages are computed from the date of official withdrawal, not from the time when the Adult Learner ceases attending classes. Please see our Refund Policy in the *MCTD Adult Learner Handbook*. The Adult Learner is required to withdraw officially by submitting a written letter of intent to the Admissions Department.

CANCELLATION OF PROGRAM: MCTD reserves the right to cancel any program prior to its start date due to lack of enrollment. In the event of such cancellation, paid fees, deposits, and tuitions will be refunded.

JOB PLACEMENT DISCLAIMER: MCTD does not guarantee job placement, salary, or occupational advancement to graduates.

NON-DISCRIMINATION POLICY: MCTD admits Adult Learners without regard to race, color, creed, national or ethnic origin, age, disability, marital status, sexual orientation, or any other basis protected by federal, state, or local law. Please see our full Antidiscrimination Policy in the *MCTD Adult Learner Handbook*.

Upon receipt of your complete application package, we will notify you via mail and email with regard to your acceptance.

We look forward to the opportunity to work with you and prepare you to be a professional Montessori educator. **By signing below, you acknowledge that you have read and understand**



all aspects of this application and recognize your legal responsibilities in regard to this application. You also agree to be photographed or videotaped for our promotional purposes. If you do not wish to be photographed or videotaped, you understand that it is your responsibility to notify us in writing.

I acknowledge that all information I have provided is truthful and accurate. I understand that any false information or willful misrepresentation will result in my application being eliminated from consideration or my enrollment in MCTD being terminated. In the event that my application is rejected, I will receive a refund of 100% paid tuition (less registration fee). If my enrollment is terminated by MCTD after the start of the program, allowable refund percentages will be computed from the date of official termination.

Applicant's Signature

Date

Essay Questions

Please respond to each of the four questions below. Responses to each question should be at least one and not more than two paragraphs long (approximately 5 to 8 sentences). Please submit your responses on a separate sheet (or sheets) of paper. Your application is not considered complete until your essay responses have been submitted.

1. Why are you interested in becoming a Montessori teacher?
2. What experience do you have working with young children?
3. Why did you choose this age group (Early Childhood – 2 ½ to 6 years)?
4. What are your short-term and long-term goals after receiving your Montessori Certification?