

COLUMBUS MONTESSORI CENTER – COMET Elementary I-II APPLICATION

Central Ohio Montessori Education for Teachers
Teaching Site: St. Joseph Montessori School
933 Hamlet Street ~ Columbus, Ohio 43201-3536
Phone: 614-291-8601 ~ Fax: 614-291-7411
Email: dbarton@cducation.org
Website: www.sjms.net/COMET

___ Elementary I (6 to 9) ___ Elementary II (9 to 12 continuing) ___ Elementary II (9 to 12 ONLY)

Date _____

Name _____ Birth date _____

Address _____

City / State / Zip _____

Phone _____ Fax _____

Email _____

Marital Status _____ Ages of Children _____

Education Background:

College / University	City / State	Dates	Degree	Major
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

⇒ **Two official copies of transcripts must be forwarded to CMC-COMET from your college / university. For students outside of the United States, an international transcript must be submitted to a US credentialing agency for credit equivalency evaluation.**

Prior Montessori Teacher Education:

Institution / Program _____ Dates _____

Address _____

⇒ **Please include a copy of your Montessori credential.**

Teaching Experience:

Name of School	Subject / Level / Grade	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Teacher Certification: _____

State	Type	Level	Effective Dates
_____	_____	_____	_____

 **Please include a copy of your state certificate with this application.**

References: Name, Position or Title, Relationship to Applicant


1. _____
2. _____
3. _____

**It is the responsibility of the applicant to request letters from the persons listed as references.
Letters can be mailed directly to CMC-COMET @ St. Joseph Montessori School.**

Personal Statement: On a separate paper, please answer each of the following questions with a brief statement:

- Why have you chosen Montessori elementary teacher Education?**
- What are your expectations of your work in CMC-COMET?**
- What are your expectations of CMC-COMET?**

Signature _____ Date _____

 **A non-refundable application fee of \$100.00 must accompany this application.
Please mail this to: Columbus Montessori Center-COMET, c/o St. Joseph Montessori School,
933 Hamlet St., Columbus, OH 43201**