



## School Leadership Program

### Certification Level:

International Montessori Council Certification<sup>1</sup> for school administrators. Full Certification is MACTE<sup>2</sup> accredited.

**Length of Course:** 16 months

### Components:

- ◆ Distance learning coursework over the entire duration with a one week break approximately every 8 weeks and 2 week winter and summer breaks.
- ◆ Single Residential session totalling 40 hours (one week) usually conducted in the US (travel and personal expenses not included).
- ◆ Practicum requirement – 9 month internship (full school year) as an administrator at a Montessori school.

### School Leadership

Program	Tuition (\$\$)	Fees
Associate Certificate* <i>online only, no residency (available to non-US residents)</i>	\$9700	\$150 application fee \$550 professional fee
Full Certificate <i>Includes residency tuition</i>	\$13000	

\*The Associate Certificate is awarded to students who complete the distance learning and practicum phase only. The Full Certificate will be awarded to students who complete the distance learning, practicum phase and residential session. While these hybrid programs may not be available to students living in the most remote places, we believe Full Certificate programs will provide the best quality of education. Those who are unable to attend the residential session must have a qualified supervising teacher working in their practicum classroom on a daily basis or have a clearly defined plan for significant weekly mentorship.

### Admission Requirements:

- ◆ A high proficiency in English is require for successful participation in this program. CGMS reserves the right to require, at its discretion, for applicants to provide evidence of their English proficiency by submitting TOEFL scores.

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<sup>1</sup> [www.montessori.org](http://www.montessori.org)

<sup>2</sup> [www.macte.org](http://www.macte.org)

- ◆ A minimum of a Bachelor's degree in any discipline from an accredited college/university or an international equivalent. Exceptions to the degree requirement may be made at the discretion of the Director of Education.

For more information, please contact [catherine@ptlc.com.sg](mailto:catherine@ptlc.com.sg)



**Programs**

Please check the box of the program you are applying for. Note that Full Certificate programs are strongly recommended at all levels. Tick (✓) your choice below:

	Associate Certificate	Full Certificate
Infant/Toddler (0-3)		
Early Childhood (3-6)		
Elementary I (6-9)*		
Elementary II (9-12*)		
Elementary I-II (6-12)*		
Secondary (12-18)*		

\*subject to approval

**General Information**

Applicant (Full Legal Name) \_\_\_\_\_

Date of Birth (mm/dd/yy) \_\_\_\_\_

**Home**

Address \_\_\_\_\_

\_\_\_\_\_

Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Phone Number \_\_\_\_\_ Email: \_\_\_\_\_

**Education (list additional colleges on separate sheet)**

College/School or Training Program	Years Attended	Degree/Certification

**Work Experience**

Please list relevant experience or significant responsibilities held. Begin with your current position. A resume may be attached to this application in lieu of this section.

Employer	Years Worked	Work Performed

**Describe any other experience you have working with children, including adolescents if applicable to the program you are applying for.**

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**Describe your interests, hobbies, and talents.**

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**Explain how you heard about and why you chose the Center for Guided Montessori Studies.**

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Which of your personal qualities are most likely to positively contribute to your work with children?

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**List the name and author of two books you have read this year and describe why they were meaningful to you. If they are relevant to your work with children, then explain how.**

**If not covered above, please explain what you know about Montessori, or experiences you have had in Montessori classrooms either as an assistant, teacher or student, including in previous Montessori courses or workshops.**

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**Internship/Practicum**

Provide the information below if you have already made arrangements for an internship/practicum site. Send later if practicum site has not yet been determined.

Name of School \_\_\_\_\_

Name of Head of School \_\_\_\_\_

Head of School Email Address \_\_\_\_\_

School Address \_\_\_\_\_

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Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Office Phone \_\_\_\_\_

Age level you will be working with \_\_\_\_\_

Name of Supervising Teacher \_\_\_\_\_

**Agreement**

I, the undersigned, do solemnly attest that all of my application information, including both above statements and those made in separate documents, are fully accurate to the best of my knowledge. I understand that intentionally providing false information on this application may constitute fraud, and will result in the forfeiture of any deposits or tuition paid, and termination of any awarded certificate.

\_\_\_\_\_  
Name of Applicant

\_\_\_\_\_  
Name of Witness

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
Witness' signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date