Skokie Montessori School
Northwestern Employee/Student Designation Form
This form must be completed and approved in order to be considered for the discount.

Please complete this form and return it to:
The Office of Work/Life & Family Resources
720 University Place, #106
Evanston, IL  60208
Phone: 847-467-3631
Email: worklife@northwestern.edu

Date of Application: ______________________________________________
Northwestern Parent/Guardian Name: _______________________________________
Northwestern ID #/Wild Card ID# (7 digits): ____________________________________

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<tr>
<th>Name of Child(ren)</th>
<th>Date of Birth</th>
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Date Child(ren) will start at Skokie Montessori School: ______________________________
Northwestern Affiliation (Please circle one from each group below)

1. Faculty  Staff  Student
2. Full Time  Part Time
3. Department or School ____________________________________________

Print Parent/Guardian Name: ____________________________________________
Signature: _______________________________ Date: ____________________

Parents will be required to complete Skokie Montessori enrollment forms, and are responsible for all fees not otherwise noted on this form. This designation form does not guarantee enrollment.

FOR OFFICE USE ONLY
The above applicant is a Northwestern University affiliate and is eligible for the 10% discount from Skokie Montessori.

Northwestern Verification Signature: _______________________________ Date: ______________

Revised: 9/29/17