



MONTESSORI INSTITUTE OF AMERICA

SUMMARY COVER PAGE

Instructions

1. Using boxes on left side, place an X in all items that are included in this submission and payment. Leave blank any boxes that do not correspond with the current payment.
2. For underlined fields on right side, enter a quantity.
3. All sections with * are required. Double check this form before submitting.

SECTION 1 - TEP INFORMATION *

Legal Name of TEP *	Today's Date (month/dd/yy) *
Program Name *	

SECTION 2 - FEES PAID * Line Totals

<u>TEP Application Options</u>			
<input type="checkbox"/>	Initial TEP Certification of one Program Level	Program Level:	_____ x \$ 1000
<input type="checkbox"/>	Initial TEP Certification of ADDITIONAL Program Level	Quantity:	_____ x \$ 500
<input type="checkbox"/>	Renewal TEP Certification of one Program Level	Program Level:	_____ x \$ 200
<input type="checkbox"/>	Renewal TEP Certification of ADDITIONAL Program Level	Quantity:	_____ x \$ 100
<input type="checkbox"/>	Deferrment: Initial TEP Certification (year 1)		_____ x \$ 400
<input type="checkbox"/>	Deferrment: Initial TEP Certification (year 2 or 3)		_____ x \$ 300
<u>Registration & Graduation Fees</u>			
<input type="checkbox"/>	Adult Learner Registrations for Infant-Toddler (0-3) Level	Quantity:	_____ x \$ 150
<input type="checkbox"/>	Adult Learner Registrations for Early Childhood (3-6) Level	Quantity:	_____ x \$ 150
<input type="checkbox"/>	Graduation Fees (Teacher Applications for Infant-Toddler (0-3) Level)	Quantity:	_____ x \$ 150
<input type="checkbox"/>	Graduation Fees (Teacher Applications for Early Childhood (3-6) Level)	Quantity:	_____ x \$ 150
<u>Practicum Site Option</u>			
<input type="checkbox"/>	Practicum Sites requesting Certificate and Website Presence	Quantity:	_____ x \$ 100
			Final Grand Total *

SECTION 3 - PAYMENT INFORMATION - How are you paying? *

<input type="checkbox"/>	On MIA website		
<input type="checkbox"/>	By Credit Card	CC Number _____	Expiration (mm/yy) _____ CVC _____
<input type="checkbox"/>	By Check	Check Number _____	
<input type="checkbox"/>	By Money Order		
<input type="checkbox"/>	Requesting formal invoice before making payment	Email address to send invoice: _____	