

**SWALLOW SCHOOL DISTRICT
GIFTED AND TALENTED PROGRAM: NOMINATION FORM**

Check Student Cumulative File: Has student previously been assessed for GT programming: YES / No		
Student Name:	Grade:	DOB:
Parent / Guardian:	Parent Email:	Phone:
Nominator:	Nominator's relationship to student:	
Homeroom Teacher:	Teacher's Email:	

This student is being nominated for the following program:

<input type="checkbox"/>	Early Gifted Learners Program (Grades K-3)
<input type="checkbox"/>	Gifted and Talented Program (Grades 4-8)

Note: The Early Gifted Learners Program is a provisional program. A review will be conducted during the 3rd grade year to determine transition into the Gifted and Talented Program

Special Areas of Consideration that could affect performance on the assessment(s) at this time:

ESL / Bilingual	
Attention / Behavior	
Special Education (IEP, 504, Behavior Plan)	
Primary Language Spoken at Home	
Other	

Check areas of giftedness which best describes this student:

<input type="checkbox"/>	General Intellectual
<input type="checkbox"/>	Specific Academic Area – Math
<input type="checkbox"/>	Leadership
<input type="checkbox"/>	Creative Thinking <ul style="list-style-type: none"> <input type="checkbox"/> Figural (uses pictures / drawings) <input type="checkbox"/> Verbal (uses words, orally or in writing)
<input type="checkbox"/>	Visual / Performing Arts (portfolio included) <ul style="list-style-type: none"> <input type="checkbox"/> Instrumental Music <input type="checkbox"/> Vocal Music <input type="checkbox"/> Drama <input type="checkbox"/> Visual Arts

Please explain how you have observed giftedness. Refer to the Characteristics of the Gifted and Talented for examples:

For Parents / Guardians Only:

The assessment process begins once two nomination forms are received by the Gifted and talented Coordinator. Completing and signing this form gives the Swallow School District permission to perform the appropriate assessments to determine whether or not placement in the Gifted and Talented Program is warranted at this time.

Parent / Guardian Signature

Date