

**T.E.A.M. Program
Teacher Referral Directions**

Teachers,

Please print and complete the entire form. Once completed, you may turn it in to your school's T.E.A.M. teacher or you may send it through interoffice mail to Leah Schmidt, GT Coordinator, at VPA.

If you have any questions regarding the referral form, please email Leah Schmidt, GT Coordinator, at lschmidt@msd3.org. Thank you for supporting the T.E.A.M. program.

**Thank you,
Leah Schmidt
Gifted and Talented Coordinator
Marion School District**

**Marion School District
T.E.A.M. Program
Gifted and Talented**

Please Note: *Gifted and Talented students are defined by Arkansas Standards as children and youth of those of high potential or ability whose learning characteristics and educational needs require qualitatively differentiated educational experiences and/or services. Possession of these talents and gifts, or the potential for their development, will be evidenced through an interaction of above average intellectual ability, task commitment and/or motivation, and creative ability.*

Teacher Referral

(Please fill out this form in its entirety.)

Teacher_____

Referral Date_____

Grade_____

School_____

Full Name of Student_____

Circle- M or F

Birthdate_____

What observed characteristics of giftedness have you observed, in regard to the referred student, that would indicate a need for GT services?

GT Coordinator Use Only:

Referral Received _____