KERMIT INDEPENDENT SCHOOL DISTRICT

PARENT/TEACHER NOMINATION FORM FOR GIFTED AND TALENTED IDENTIFICATION

Please complete this form if you would like to nominate a student for screen for identification as a participant in the gifted and talented program. The campus G/T committee will review each nominated student's case study on specific criteria established for placement in the program. Please print or type all requested information and return to the campus principal by the specified date.

Student's Name			Date
Grade	Campus	Tead	cher
Date of Birth			
Address			
Phone Number		E-m	ail
Your relationship to st	udent: Parent Teacher	Self	Other
Teacher Nomination	Only:		
How long have you tax	aght this student?		
Please write a short na	rrative explaining why you a	re nominating	this student for identification. The
following personal cha	racteristics should be consid-	ered: intellectu	ual curiosity, enthusiasm for
knowledge, social and	emotional maturity, and com	nmunication sk	rills.
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(Signature)			