

**G.A.T.E.**

Gifted and Talented Education

Park County School District #6

919 Cody Ave. Cody, WY 82414

(307) 587-4275 Ext. 5541; or (307) 587-4273 Ext. 5264

Referral Form FOR GIFTED SERVICES

Student: _____ Date: _____

Birthdate: _____ School: _____

Grade: _____ Teacher/Team: _____

Referred by: _____ Parent _____ Teacher _____ Self _____ Other _____

Park County School District #6 recognizes that some students have potential for performing at remarkably high levels when compared with others of their age, experience, or environment. These students have needs that require unique learning experiences. The district will provide tailored instructional services, known collectively as G.A.T.E. (Gifted and Talented Education), for intellectually gifted and talented students designed to meet their academic, social, emotional, and creative needs.

In order for the process for possible identification for the G.A.T.E. program to start, this form must be completed and all requested documentation must be attached.

Why are you referring this student for possible Gifted & Talented services?

What are your concerns for this student at this point?

What characteristics of giftedness do you see in this student? Please use specific examples to explain your thinking. (Feel free to use the back of the paper or attach additional information).
