The Governor's Program for Gifted Children

GPGC

Application for Admission 2019

PART A (to be completed by parent/guardian):

Please fill out the first page of this application fully and take it to your child's school to complete the second page.

APPLICANT INFORMATION:

Name: _____
first middle last

Home #:_____ Birthday:_____ Current School Grade: _____

Mailing Address:_____
(street) (city) (state) (zip)

Mother's name:_____ Email: _____

Home # (if different):_____ Cell #:_____ Work #: _____

Father's name:_____ Email: _____

Home # (if different):_____ Cell #:_____ Work #: _____

RELEASE

I authorize my child's school to release to the Governor's Program for Gifted Children all information required to complete this application. I understand that this information will be kept confidential.

_____ _____ _____
Parent/Guardian Printed Name Parent/Guardian Signature Date

SCHOOL INFORMATION:

School and School System _____

School Address _____
(street) (city) (state) (zip)

Teacher's Name & Title/Subject _____

PART B (to be completed by student's school)

Instructions to the school: Please complete the second page of this form for the above named student. It may be placed in a sealed, signed envelope if desired before returning to the student. Thank you for your help with our assessment of this student.

Student's Name _____

TEST INFORMATION: For students already classified as gifted by the school system, please supply a copy of the Pupil Appraisal form from your Special Education Department and the student's IEP. Please list any test results on file within the past two years. If your student is not classified as gifted, please request a copy of our Report of Psychological Testing form by phone (337-475-5446) or email (office@gpgc.org).

Name of Test	Date Administered	Score (I.Q., grade equivalent, percentile rank)

SCHOOL ACHIEVEMENT RECORDS:

Subject	Title and Course Number	Grades: (end of last year)	Title and Course Number	Grades: (so far this year)
English				
Math				
Science				
Conduct				
Other (Specify)				

TEACHER COMMENTS: Please use the space below to describe this child's personality, character, social attitudes and adjustment, motivation to learn, and work-study habits. If possible, illustrate with anecdotal material. List any special abilities such as ability to play a musical instrument, write stories or poetry, art work, etc., and other special interests.

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Signature of Principal Date Printed Name

_____ _____ _____

Signature of Teacher Date Printed Name