

**COLLEGE STATION INDEPENDENT SCHOOL DISTRICT**

**PARENT/TEACHER NOMINATION FORM FOR  
GIFTED and TALENTED PROGRAM IDENTIFICATION**

Please complete this form if you would like to nominate a student for screening for identification as a participant in the gifted and talented program. The campus Admission/Review/Exit (A.R.E.) committee will review each nominated student's case study on a specific criteria established for placement in the program. Please print or type all requested information and return to the campus Enrichment Specialist by **March 4, 2016**.

Student's Name \_\_\_\_\_ Date \_\_\_\_\_

Grade \_\_\_\_\_ Campus \_\_\_\_\_ Teacher \_\_\_\_\_

Date of Birth \_\_\_\_\_ - \_\_\_\_\_  
Year Month

Address \_\_\_\_\_  
(Street) (Apt.) (Zip Code)

Phone Number \_\_\_\_\_ E-mail \_\_\_\_\_

Your relationship to student: Parent \_\_\_\_ Teacher \_\_\_\_ Peer \_\_\_\_ Self \_\_\_\_ Other \_\_\_\_

**Teacher Nomination Only:**

How long have you taught this student? \_\_\_\_\_

Please write a short narrative explaining why you are nominating this student for identification. The following personal characteristics should be considered: intellectual curiosity, enthusiasm for knowledge, social and emotional maturity, and communication skills.

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(Signature)