

**Middle School Nomination Form**  
**Gifted Education Services & Learning Environment for Advanced Programming**

(Current Enrolled CHCCS students)

(New students registered in CHCCS after January 11, 2019)

**Due to Middle School Gifted Education Specialist by  
January 12, 2019**

**Due to District Coordinator for Gifted Services by  
July 25, 2019**

I am nominating (student name) \_\_\_\_\_ PowerSchool ID# \_\_\_\_\_  
for consideration by the School Gifted Program Team for Gifted Education Identification.

**Check area of need:**     ☐ Reading                      ☐ Math                      ☐ Both Reading and Math

**Check one or more criteria that apply:**

- ☐ Standardized aptitude test score at or above the 90<sup>th</sup> percentile within the past 24 months. This includes testing administered outside our school district. (Attach a copy of the testing results.)\*  
Aptitude Test Name: \_\_\_\_\_ Test date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Full scale test score: \_\_\_\_\_%
- ☐ Standardized achievement test at or above the 90<sup>th</sup> percentile within the past 24 months (reading or math totals). This includes testing administered outside our school district. (Attach a copy of outside testing results.)\*  
Achievement Test Name: \_\_\_\_\_ Total Reading Score: \_\_\_\_\_% Test date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Achievement Test Name: \_\_\_\_\_ Total Math Score: \_\_\_\_\_% Test date: \_\_\_\_/\_\_\_\_/\_\_\_\_
- ☐ Ratings on the gifted characteristics scales. (Parent, guardian, community member, or teacher may request this form from the GES)
- ☐ Identification in another school district. (Attach a copy of identification and/or an educational plan for participation.)
- ☐ **LEAP** (ALL 3 criteria listed below must be 97% or higher to be screened for this level of service for grades 4 and above)  
Must answer statements on p.2  
Aptitude Score: \_\_\_\_\_ Math Achievement Score: \_\_\_\_\_ Reading Achievement Score: \_\_\_\_\_

**Teacher nominations only:**

- ☐ Diagnostic assessment in ELA or math that demonstrates high ability and performance
- ☐ Data with evidence of advanced abilities from multiple observations using research-based instrument (ex: TOPS)
- ☐ WIDA/ACCESS test results showing patterns of rapid growth and achievement along with recommendation of ELL teacher
- ☐ Student work portfolio
- ☐ Student interview (request with GES)
- ☐ Ratings on the gifted characteristics scales

Name of Person Nominating this Student (Please print): \_\_\_\_\_

Check one of the following:     ☐ Parent/Guardian                      ☐ Teacher                      ☐ Community Member

Student's current school: \_\_\_\_\_ Classroom teacher: \_\_\_\_\_

Student's current grade: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Race: \_\_\_\_\_ Gender: \_\_\_\_\_

Student's address: \_\_\_\_\_  
Street City Zip

Parent/Guardian's Name (please print): \_\_\_\_\_ Phone: \_\_\_\_\_

Email Address (please print clearly): \_\_\_\_\_

\*Achievement and aptitude tests from outside sources must adhere to [Guidelines for Independent Evaluations](http://www.chccs.k12.nc.us/groups/gifted-education) available on the district website at <http://www.chccs.k12.nc.us/groups/gifted-education>.

I understand that referrals may be submitted at any time and they will be reviewed during an established identification window.  
**As the parent/guardian, I give permission for my child to participate in appropriate aptitude and/or achievement testing as part of the identification process.**

\_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_



**Signature of Parent/Guardian**

Please respond to the following questions to provide information that will help the School Gifted Program Team and the District Gifted Identification Committee know more about the academic and intellectual needs of this student. Feel free to type and attach your responses.

1. Describe why you believe this student needs to be identified gifted. Describe or cite specific examples.
2. Share examples of this student's performance or intense interest in a particular topic, project, or other academic or intellectual endeavor.
3. Provide one or two examples that characterize this student's learning style, preference, or habits.
4. Please add anything else you would like the team to know about this student in relation to academic or intellectual performance or potential.