



Appeal Request

Student Name _____ Grade _____

School _____ Date _____

Person Making the Appeal _____

Please answer the following questions on a separate piece of paper. Attach your responses to this sheet.

1. Please give the reasons why you are submitting this appeal.
2. Describe the area(s) of giftedness observed in the student.
3. When did you first become aware of this ability and describe how the student demonstrates this ability?
4. Explain your concerns related to the current educational program the student is experiencing and how this programming is not meeting his/her needs.
5. What additional information would you like the identification team to know about the student that may have been initially overlooked? Please include any additional assessment results, student work samples or projects completed outside of the school setting.

Please submit this form and any other additional documents to the building principal. You will be notified of the date of the appeal conference. It is requested you attend this conference to give any additional explanation or information to assist the screening committee. If you have any other questions or concerns about the gifted identification process, please contact Lisa Rogers, Student Achievement Coordinator, at 382-1300.