



**AREAS OF GIFTEDNESS:  
READING / SOCIAL STUDIES  
OR  
MATH / SCIENCE**

**PARENT APPLICATION FOR POSSIBLE PLACEMENT IN  
THE GARLAND ISD GIFTED PROGRAM  
MIDDLE SCHOOL PROGRAM**

Date \_\_\_\_\_

**Directions:** Please complete **all** of this nomination form and return it to:

Gifted & Talented Dept., 501 S. Jupiter Rd., Garland, TX 75042 - by January 23, 2009

Child's Name \_\_\_\_\_ ID# \_\_\_\_\_  
Last First

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_ M \_\_\_\_\_ F Ethnicity \_\_\_\_\_

Current School \_\_\_\_\_ Grade \_\_\_\_\_ Teacher's Name \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_

Address \_\_\_\_\_  
Street City Zip *Mapscos location (if known)*

Home Phone \_\_\_\_\_

Father's Business Phone \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Mother's Business Phone \_\_\_\_\_ Fax ( ) \_\_\_\_\_

**Students who score frequently above 90% in total math or total reading on current standardized achievement tests, grade cards, ability tests and other data may need the GT program services.**

**Please complete the following statements:**

"Passions" or long-term interests my child has had: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Factors to Consider when Applying for Possible Placement in the Gifted Program**

Families should discuss the academy gifted program components (academic acceleration, enrichment, research and independent study) as they complete the following section.

**Circle Yes or No to the following items:**

- Yes No 1. Does your child want to be in the Gifted Program at Austin Academy? Why?  
\_\_\_\_\_  
\_\_\_\_\_
- Yes No 2. Will your child be able to complete assignments at an enriched/accelerated pace with sustained effort?
- Yes No 3. Will your child feel comfortable among other gifted and/or talented children?
- Yes No 4. Does your child complete assignments by the designated deadlines?
- Yes No 5. Does your child have adequate study and/or organizational habits to balance the "light" and "heavy" homework days?
- Yes No 6. Does your child support and cooperate with children of all abilities and talents?
- Yes No 7. Will you and your child understand that grades may fluctuate in accelerated and/or enriched classes?
- Yes No 8. Will you and your child encourage the commitment to academics over excessive "extra curricular" activities?

**Awards, Honors and Activities**

Please check all of the following that apply to your child and attach a copy of the certificate, award or letter from your principal to verify the accomplishment.

\_\_\_\_\_ District Science Fair winner  
\_\_\_\_\_

Topic Year Award

\_\_\_\_\_ District UIL winner  
\_\_\_\_\_

Topic Year Award

\_\_\_\_\_ Duke Scholar \_\_\_\_\_  
Year

*I understand that my child is being evaluated for possible placement in the GISD Gifted Program.*

Parent/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

*(Parents of children applying for possible gifted program placement must live within the Garland ISD at the time of application.)*