SMACKOVER-NORPHLET GIFTED AND TALENTED PROGRAM
TEACHER, PARENT, PEER, OR SELF NOMINATION FORM

STUDENT NAME _____ AGE _____ GRADE _____

Person Nominating _____ Relationship to Student_____

Please describe in specific terms any outstanding abilities which you believe the nominated person to possess. You might want to include statements of musical, artistic, or literary talent as well as scientific and/or academic achievement. Why do you wish the nominated person to participate in this program?

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

BRIGHT CHILD	**GIFTED LEARNER**
Knows the answers	Asks the questions
Is interested	Is highly curious
Is attentive	Is mentally and physically involved
Has good ideas	Has wild silly ideas
Works hard	Plays around, yet tests well
Answers the questions	Discusses in detail
Top group	Elaborates beyond the group
Listens with interest	Shows strong feelings and opinions
Learns with ease	Already knows
6-8 repetitions for mastery	1-2 repetitions for mastery
Understands ideas	Constructs abstractions
Enjoys peers	Prefers adults
Grasps the meaning	Draws inferences
Completes assignments	Initiates projects
Is receptive	Is intense
Copies accurately	Creates new designs
Enjoys school	Enjoys learning
Absorbs information	Manipulates information
Technician	Inventor
Good memorizer	Good guesser
Prefers straightforward tasks	Thrives on complexity
Is alert	Is keenly observant
Is pleased with own learning	Is highly self-critical

_____
Signature

_____
Date

***Nomination forms are accepted throughout the year but are due by April 22, 2016 to be considered for testing this year**.

(Janice Szabos, Challenge) Revised August 27, 2015