



## Highly Capable Program

### Application for Highly Capable Service Transfer

*For students who received highly capable services in another district and are applying for services in Shoreline*

You may apply for placement in Shoreline's highly capable program if your student was enrolled in a highly capable/gifted program in another school district. Your student must have been receiving highly capable services **immediately preceding** your move to the Shoreline School District. Complete your move and register your student with Shoreline prior to applying for highly capable services. Please provide the following documentation:

- Verification of enrollment in your student's previous district's highly capable program.
- Cognitive aptitude scores from a school-administered equivalent cognitive aptitude test.
- Academic achievement test scores (e.g., STAR, IOWA/ITBS, MAP, i-Ready, etc.).
- State testing results (if applicable; e.g., Smarter Balanced).
- Report cards from the previous year.

We evaluate all students using the CogAT, Iowa and/or i-Ready, and multiple data points. To determine if placement is appropriate, we will evaluate cognitive and achievement assessment results and other data from your previous school district. Shoreline accepts only tests that were administered by a public or private school. Tests administered by outside agencies will not be accepted.

**Follow these steps if you would like your student to be evaluated for placement.**

1. Enroll at your designated Shoreline School District home school. ***This must be done first.***
2. Submit an Application for Highly Capable Service Transfer form. ***(PLEASE NOTE: This is not an application for testing. It is only for students that were previously enrolled in a highly capable program in another school district).***
3. Provide the test results from the assessments required for placement in the highly capable program at your previous district and all other required documents listed above.



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### RETURN THIS FORM VIA

**U.S. Mail:** Highly Capable Program      **or**      **Email:** [highlycapable@ssd412.org](mailto:highlycapable@ssd412.org)  
Shoreline School District  
18560 1<sup>st</sup> Avenue NE  
Shoreline, WA 98155

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Current School: \_\_\_\_\_ Shoreline Student ID#: \_\_\_\_\_

Current Grade Level: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

Preferred Date of Enrollment:

Immediately

Fall of Year \_\_\_\_\_

- 1. Attach copies of the tests that your student took for acceptance into the highly capable program at your previous school district, including the full CogAT and academic achievement test scores.**
- 2. Include verification of your student's enrollment in a highly capable program.**

\_\_\_\_\_  
Parent/Guardian Name:

\_\_\_\_\_  
Parent/Guardian Signature

*For Highly Capable Program office use only below this line*

**Cognitive Test:**

Verbal: \_\_\_\_\_

Quant.: \_\_\_\_\_

Non Verbal: \_\_\_\_\_

**Achievement Test(s):**

Test Name: \_\_\_\_\_

Reading Score: \_\_\_\_\_

Math Score: \_\_\_\_\_

Approved for ELA

Approved for Math

Not Approved

Date: \_\_\_\_\_