



Valley View Local School District

59 Peffley St

Germantown, OH 45327

(937) 855-6581

Referral for Gifted Identification Permission for Assessment

The Valley View Local School District accepts referrals, screens and identifies, or screens and reassesses students who perform or show potential for performing at high levels of accomplishment in the areas of superior cognitive ability, specific academic ability, creative thinking ability, and/or visual and/or performing arts. The district must follow policy and procedures established in Ohio Administrative Code 3301-51-15. These rules specify that assessment instruments must come from the list approved by the Ohio Department of Education.

The district ensures there are ample and appropriate scheduling procedures for assessment and reassessment using:

- Group or individually administered tests
- Audition or performance
- Display of work or exhibition
- Checklists

Children may be referred on an ongoing basis, through any of the following:

- Child request (self-referral) or child referral of peer
- Teacher recommendation or parent/guardian request
- Other (e.g., psychologist, community members, principal, gifted coordinator, etc.)

Upon receipt of a referral, Valley View Schools will obtain parental permission (if the parent is not referring) for assessment. Parents will be notified of the assessment and identification results within thirty days of the district receiving the assessment score(s).

Please return completed form to Katie Pearson, Gifted Coordinator
59 Peffley St Germantown, OH 45327 or katie.pearson@valleyview.k12.oh.us



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Referral for Gifted Identification & Permission for Assessment

Student Name _____ DOB _____

School _____ Grade ____ Teacher: _____

Address _____
Street Address City State Zip Code

Parent/Guardian _____

Contact Info _____
Daytime Phone Email Address

Person Referring _____ Relationship to Student _____

Gifted Identification request is for:

- ____ Superior Cognitive Ability
- ____ Specific Academic Area – indicate subject(s) _____
- ____ Creative Thinking Ability
- ____ Visual & Performing Arts – indicate area _____

What are the child's strengths and interests? _____

Is there any other pertinent information not previously described? _____

Note: In giving my permission, I understand that review of relevant records, interviews with the student and/or teacher(s), observations of the child, and assessment (e.g. curriculum-based screening and/or standardized testing) may occur:

parent/guardian signature

date

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