



SAN ELIZARIO INDEPENDENT SCHOOL DISTRICT

A Proud Community of Champions – Soaring to Excellence



Gifted and Talented Education Teacher Nomination Form

Student Name: _____ Grade: _____ Nomination Date: _____

Student ID #: _____ Teacher: _____

I am nominating _____ for the following reasons: (Please be specific in providing academic information, which demonstrates how he/she shows potential that is beyond his/her age level peers.)

Please rank the student's strength in the following areas using the following guidelines:

1 = Demonstrates skills/potential significantly beyond that of peers

2 = Demonstrates skills/potential beyond peers

3 = Demonstrates skills/potential commensurate with peers

4 = Demonstrates below average ability in that area

5 = Not observed

Leadership Ability _____ Mathematics _____ Social Studies _____ Writing Ability _____

Creative Ability _____ Science _____ Reading Ability _____ Oral Communication _____

Nominated by: _____

Teacher Signature: _____ Date: _____

DEPARTMENT OF CURRICULUM AND INSTRUCTION