



GIFTED & TALENTED REFERRAL FORM
La Pryor Independent School District

Gifted/Talented Referral Form

I, _____, as parent/guardian/teacher/community/self member would like to refer
(Please print) (Please circle)

_____ for the Gifted/Talented screening and assessment process. I believe this child
(Print student's name)

has an extraordinarily high level of intellectual or academic ability and that his/her educational needs can best be met
by Gifted/Talented Services. I understand the school district will make every effort to determine the best possible
educational services based on the student's educational needs. This child is currently in grade _____.

§29.121. Definition

In this subchapter, "gifted and talented student" means a child or youth who performs at or shows the
potential for performing at a remarkably high level of accomplishment when compared to others of the same
age, experience, or environment and who:

- (1) exhibits high performance capability in an intellectual area;
(2) possesses an unusual capacity for leadership; or
(3) excels in a specific academic field.

Talented Education Program as defined above.

For grades 7-12, please circle the subject area(s) for which you are referring the above student:

Math Science Language Arts Social Studies

Printed name of Person Making Referral

Signature of Person Making Referral

Date

LPISD OFFICE USE ONLY:
Date Received at Office: _____ Time Received at Office: _____
LPISD Office Staff Accepting Nomination Form: _____
LPISD Campus: _____ Grade of Nominated Student: _____