

Guilford County Schools Gifted Education Referral Form

Referral Date:	
Student Name:	Student ID:
School:	Grade Level:
Name of Person Initiating Referral:	
Relationship to Student:	

The student listed above is being referred for possible identification for academically gifted services. Official identification for academically gifted services does not begin until Grade 3. A referral for AG services will result in a review of current student data; but may not necessarily lead to additional testing. If needed, testing for AG services occurs during the AG testing windows:

• Day 1 - 30 of school year

Reason(s) for Referral:

Request for grade acceleration	
Request for subject acceleration	testi
Grades are mostly "As"	proc
Unchallenged with regular curriculum	seco revi
Asks/Answers questions above and beyond same age peers	for A
Enjoys studying and/or performing topics out of school	
Writes/Creates using detail and originality	

Note: At the secondary level, additional testing is not a part of the AG referral process. When referrals are received for secondary students, available data will be reviewed to determine the student's eligibility for AG services.

Mid-October – January 30

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Describe:

Please add any additional information describing your reason for referring this student:

Please check the following characteristics and factors that describe this student:

CHARACTERISTICS:			
<u>Leadership</u>	Motivation		
Shows initiative and independence	Persistent in tasks		
Accepts and carries responsibility	Keen interest in a variety of topics and activities		
Influences peers	Concerned with right and wrong; fairness		
Creativity	Academic Performance		
Is curious	Knowledgeable on a variety of topics		
Shows imagination	Is observant		
Has a keen sense of humor	Uses an advanced vocabulary & asks questions		
OTHER FACTORS: Limited English Proficient Participation in EC Services Yes Student is LEP & enrolled in EL services Student enrolled in EC services No Former LEP student who is being monitored Former EC student			

Please share any additional information which would help us better understand this student

Please return completed form to the AIG teacher at the child's school.