STUDENT REFERRAL FORM

Gifted and Talented Education Services

SAN JUAN BOCES

Student Name: _____

School: _____ **Grade Level:** _____

Generally, students who are performing or have the potential to perform 2 or more grade levels above their current grade and/ or score advanced on standardized tests are good candidates for referral. Students who demonstrate exceptional performance or potential in a talent area are also great candidates.

A student is eligible for identification when:

- The research-based strategies and interventions for advanced students used in the regular classroom are inadequate to address the child's area(s) of strength, and the interventions require an intense and sustained amount of resources; **and** a body of evidence, collected by gifted education staff after the referral, shows exceptional potential in any of the areas listed below.
- The student meets the definition for gifted according to state and district guidelines. (See https://www.cde.state.co.us/gt/about).

I believe that _____ is performing well above grade level or demonstrates exceptional potential in the following areas. I would like his/her performance and achievement to be reviewed to determine eligibility for gifted education services.

Suspected Areas of Exceptional Ability (check all those that apply):

_____General Ability (critical and creative thinking, problem solving, learning aptitude)

_____Reading _____Writing _____Math _____ Science _____World Language

_____ Creativity

_____ Leadership

_____ Music/Visual Arts/Dance/Psychomotor/ Drama

(List specifics) _____

I feel this candidate should be nominated because of the following qualities:

_____ I understand that assessments of ability or achievement may be administered to this student as part of the identification process.

_____ _____

Referrer's Signature Date

Please mark appropriate box: __**Self** __**Peer** __**Parent** __**Staff** ___ **Community member**

Please return nomination form to the student's school office or Gifted Facilitator.