

Boardman School District

Referral Form

G1

Child _____ School _____ Grade _____

Is referred for possible identification as gifted in the following area(s):

Reason

Superior Cognitive Ability

Specific Academic Ability

- Mathematics _____
- Science _____
- Reading _____
- Social Studies _____

Creative Thinking Ability

Visual or Performing Arts Ability
(such as drawing, painting, sculpting,
music, dance, drama)

Signature of Person Initiating Referral Position or Relationship to Child Phone Date

Signature of Person Receiving Referral Date

PLEASE RETURN TO MR. H. JARED CARDILLO, CURRICULUM DIRECTOR

NOTE: A parent may request assessment through any verbal or written means to the building administrator