



YOUNG SCHOLARS OF WESTERN PA CHARTER SCHOOL GIFTED & TALENTED PROGRAM PARENT NOMINATION FORM

Young Scholars of Western PA Charter School is committed to implement a program that meets the unique social, emotional, and intellectual needs of gifted and talented students through the collaboration of students, educators, parents and community members that ensures opportunities for maximum growth and development for lifelong success.

Parent Name: _____ Phone Number: _____

Student Name: _____ School: _____

Current Teacher: _____ Current Grade: _____

Additional Comments:

- Please attach supportive documents (certificates, awards, etc.)

I, _____, parent of _____, nominate my child for the G/T program. I also understand this nomination does not mean my child will be placed automatically in the Gifted and Talented Program. I give consent that my child be tested and evaluated for the program.

Parent Signature: _____ Date: ____/____/____