

GREENFIELD-CENTRAL CSC
PARENT NOMINATION FORM

PUPIL'S NAME _____ GRADE: _____
SCHOOL _____
PARENT'S NAMES _____
ADDRESS: _____ PHONE _____

ZIP _____
PARENT CONTACT EMAIL ADDRESS _____

1. Describe briefly your child's major interests, hobbies, activities, etc.

2. Describe briefly your child's reading habits, patterns, types of reading and level of difficulty when reading at home.

3. Describe any special talents that your child has exhibited either now or during pre-school years - include musical, artistic, creative, and leadership characteristics as well as intellectual and academic talents.

4. Please give any other information about your child which you believe describes his/her abilities or interests.

5. What are some things you have observed in your child's behavior which lead you to believe that he/she should be in a program for high ability children?

6. What challenges, if any, is he/she having in school as a result of high ability?



Greenfield-Central
Community School Corporation

High Ability Education Program

Parent Nomination Form

**CHARACTERISTICS THAT ARE OFTEN EXHIBITED
BY CHILDREN WITH HIGH ABILITY**

Please check (✓) if you have noticed these traits in your child now or if you saw them at an earlier age, perhaps as a preschooler. The checking of a significant number of these items is considered as a Parent Nomination for screening of pupils for High Ability programs.

- _____ 1. Learns new things rapidly and easily.
- _____ 2. Uses a great deal of common sense and practical knowledge.
- _____ 3. Reasons things out. Thinks clearly. Recognizes relationships. Comprehends meanings.
- _____ 4. Retains what he/she has heard or read without much rote drill. Good memory.
- _____ 5. Knows about many things which most students are unaware.
- _____ 6. Has a large vocabulary which he/she uses easily and accurately.
- _____ 7. Began reading early – before age 5. Can read books that are one to two years in advance of the rest of the class.
- _____ 8. Performs difficult mental tasks such as “brain teasers”, complex riddles.
- _____ 9. Asks many questions. Has a wide range of interests.
- _____ 10. Does some academic work one to two years in advance of the class or does more advanced work at home than he/she does at school.
- _____ 11. Is original in his/her thinking. Uses good, but unusual methods.
- _____ 12. Is alert, keenly observant and responds quickly.

I would like to have _____ considered for Greenfield-Central High Ability programs and give my consent for additional cognitive and achievement testing as needed to determine eligibility. I understand this review will occur at the next identification cycle.

Parent's Signature

Additional comments are welcomed. Feel free to add additional pages as needed.

Please return this form to your school office, or mail directly to:
Greenfield-Central Community School Corporation
Attn: High Ability Programs
110 W. North St.
Greenfield, IN 46140