

TRANSYLVANIA COUNTY SCHOOLS

Superintendent
Dr. Jeff McDaris

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Brevard, NC 28712-3299 www.tcsnc.org

Transylvania County Schools Parent Notification/Permission to Test after LEA Transfer Academically/Intellectually Gifted Program

Dear Parent/Guardian:

Re: _____ (Student)

Your child's school records indicate that he/she was identified as academically/intellectually gifted by _____ school district in North Carolina. Our school Team for Academically Gifted (TAG) regards this previous identification as a nomination to considered your child for services in the Transylvania County Schools Academically/Intellectually Gifted program.

With your permission, the TAG will further review your child's school history, including achievement, aptitude, performance, interest, and motivation. The TAG may also require your observations (a behavioral checklist) about your child, observations by Transylvania County teacher(s), and further testing if additional information is needed. Your written permission is required for these teacher observations and testing. Please indicate your decision and return this letter to your child's school.

Additional information may be found in the attached *Academically/Intellectually Gifted Parent Handbook*. If you have questions or concerns about this request, please contact me.

Sincerely,

TAG Chairman

Date

School

_____ I acknowledge notification of my child's referral for AIG services and have received the *Academically/Intellectually Gifted Parent Handbook*.

_____ Yes, I give my permission for my child to be evaluated should additional

information be required.

_____ No, I do not give permission for my child to be evaluated and/or considered

Parent Signature

Date