



Permission for Visual/Performing Arts Assessment

Student: _____ ID: _____

Address: _____

Phone: _____ School: _____ Grade: _____

Referred by: _____

Your student has been referred for assessment to determine possible gifted identification in one or more areas of visual and performing arts. Assessments approved by the Ohio Department of Education are required for identification purposes. One or more of the following assessments may be administered to your child:

- *Scales for Rating the Characteristics of Superior Students*
- *Gifted and Talented Evaluation Scales*
- *ODE Rubric of Visual and Performing Arts Display of Talent*

No assessment will be done without your written permission. Please read the information below and return it to the address by September 18, 2019. Forms received after September 18 will be included in the spring assessment cycle. If you have questions, please contact the Gifted & Talented office at 614-365-6626.

***Testing is for identification purposes only and does not mean that gifted services will be offered.*

I understand that if I grant permission, my child will receive assessment(s) by designated school personnel and that the information may be shared with teachers, principals, and other appropriate school personnel. I will be informed of whether or not my child meets the criteria for gifted identification as set by the State of Ohio.

_____ Permission is given to conduct the assessment(s)

_____ *Permission is given to contact my child's private music/dance/drama/art teacher (if applicable)* _____ *Name of Facility*

_____ Permission is denied

Signature

Relationship to Child

Date

Please return signed and completed form to:

Gifted & Talented
3700 S. High St.
Columbus, OH 43207
(614)365-8605 (FAX)

Equal access will be available to all students for screening, further assessment, identification, and placement for eligible services, including minority or disadvantaged students, students with disabilities, and students for whom English is a second language.