

Permission to Evaluate

School personnel must issue this form to obtain written consent from a child's parent/guardian to conduct an initial evaluation.

Oral Request by Parent

Date:

Written Request by Parent

Date:

Date Sent:

Student Name:

Name and Address of Parent:

Dear **Parent Name**,

The school district requests your consent to conduct a Gifted Multidisciplinary Evaluation. We must have your consent before we can begin.

In the evaluation, we will investigate information relevant to your child's suspected giftedness, including academic functioning, learning strengths and educational needs as shown by present levels of educational performance, assessment results, classroom observations and information from you. We will also be looking for an indication of demonstrated achievement, performance or expertise in one or more academic areas. Specific types of tests and procedures that will be used in the evaluation include the following:

The school district will form a Gifted Multidisciplinary Team to conduct the evaluation. As a parent(s), you are a member of the team. You will be invited to all team meetings. The multidisciplinary evaluation process will include information from parents or others who interact with the student on a regular basis and may include information from the student if appropriate. If you want to send written comments, please do so.

The Gifted Multidisciplinary Team will determine whether your child is gifted and in need of specially designed instruction. This information will be outlined in a *Gifted Written Report*. If the team determines your child is eligible for specially designed instruction the *Gifted Written Report* will be given to the GIEP team. As a parent(s), you are also a member of the GIEP team. You will be invited to all team meetings. The Gifted Multidisciplinary Evaluation is to be completed and the *Gifted Written Report* is to be delivered to you within 60 calendar days of receipt of your consent to evaluate.

Please read the enclosed *Notice of Parental Rights for Gifted Students*, which includes parent resources such as state or local advocacy organizations. If you have any questions, or if you need the services of an interpreter, please contact me.

Name:

Position:

Phone Number:

Email Address:

Directions for Parents

Please check the appropriate item(s), sign and return this form to the person above. The school district may request a hearing to proceed with a reevaluation if you fail to respond to this request.

- I give consent to start an initial Gifted Multidisciplinary Evaluation as you propose.
- Please contact me. I am not ready to give consent for an initial Gifted Multidisciplinary Evaluation at this time and would like to talk about this.
- I object to the proposed initial Gifted Multidisciplinary Evaluation. Please do not begin the process at this time.
- I request mediation
- I would like an impartial due process hearing

Parent Signature

Date

Daytime Phone Number:

Email Address:

____ (Initial) I have received a copy of the *Notice of Parental Rights for Gifted Students*.

* The enclosed *Notice of Parental Rights for Gifted Students* provides information on the options listed above.

Ruhusa ya Kutathmini

Lazima wafanyakazi wa shule watoe fomu hii ili kupata kibali kilichoandikwa kutoka kwa mzazi/mlezi wa mtoto ili kufanya tathmini ya kwanza.

- Ombi Lisiloandikwa kutoka kwa Mzazi**
Tarehe:

- Ombi Lilioandikwa kutoka kwa Mzazi**
Tarehe:

Tarehe Ilitumwa:

Jina la Mwanafunzi:

Jina na Anwani ya Mzazi:

Jina la Mzazi mpendwa,

Wilaya ya shule inaomba kibali chako kufanya Tathmini ya Aina Nyingi ya Nidhamu kwa Wenye Vipawa. Ni lazima tupate kibali chako kabla ya kuanza.

Katika tathmini hii, tutachunguza maelezo yanayohusiana na kipawa kinachoshukiwa kuwa cha mtoto wako, ikijumuisha utendaji wa kitaaluma, uwezo wa kujifunza na mahitaji ya kielimu kama inavyoonyeshwa na viwango vya sasa vya utendaji wa elimu, matokeo ya tathmini, uchunguzi wa darasani na maelezo kutoka kwako. Pia tutakuwa tukitafuta ishara ya mafanikio, utendaji au utaalamu ulioonyeshwa katika eneo moja au zaidi za masomo. Aina mahususi za vipimo na taratibu zitakazotumika katika tathmini zitajumuisha yafuatayo:

Wilaya ya shule itaunda Timu ya Aina Nyingi ya Nidhamu kwa Wenye Vipawa ili kufanya tathmini. Kama mzazi, wewe ni mwanachama wa timu. Utaalikwa kwenye mikutano yote ya timu. Mchakato wa tathmini ya aina nyingi ya nidhamu utajumuisha maelezo kutoka kwa wazazi au watu wengine wanaowasiliana na mwanafunzi mara kwa mara na inaweza kujumuisha maelezo kutoka kwa mwanafunzi ikifaa. Ikiwa unataka kutuma maoni yaliyoandikwa, tafadhali tuma.

Timu ya Aina Nyingi ya Nidhamu kwa Wenye Vipawa itaamua ikiwa mtoto wako ana kipawa na anahitaji mafundisho maalum yalioundwa. Maelezo haya yataainishwa katika *Ripoti Iliyoandikwa ya Wenye Vipawa*. Timu ikiamua kuwa mtoto wako anastahiki kupata mafundisho maalum yalioundwa, *Ripoti Iliyoandikwa ya Wenye Vipawa* itatolewa kwa timu ya GIEP. Kama mzazi, wewe pia ni mwanachama wa timu ya GIEP. Utaalikwa kwenye mikutano yote ya timu. Tathmini ya Aina Nyingi ya Nidhamu kwa Wenye Vipawa itakamilika na *Ripoti Iliyoandikwa ya Wenye Vipawa* itawasilishwa kwako ndani ya siku 60 za kalenda baada ya kupokea kibali chako cha kutathmini.

Tafadhali soma Taarifa iliyoambatanishwa ya *Haki za Wazazi wa Wanafunzi Wenye Vipawa*, ambayo inajumuisha nyenzo za wazazi kama vile mashirika ya utetezi ya serikali au ya mtaa. Ikiwa una maswali yoyote, au ikiwa unahitaji huduma za mkalimani, tafadhali wasiliana nami.

Jina:

Cheo:

Nambari ya Simu:

Anwani ya Barua pepe:

Maelekezo ya Wazazi

Tafadhali tia alama kwenye vipengele vinavyofaa, tia sahihi na urejeshe fomu hii kwa mtu aliye hapa juu. Wilaya ya shule inaweza kuomba kusikilizwa ili kuendelea na kutathmini upya iwapo utashindwa kujibu ombi hili.

- Ninatoa kibali cha kuanza Tathmini ya kwanza ya Aina Nyingi ya Nidhamu kwa Wenye Vipawa kama unavyopendekeza.
- Tafadhali wasiliana nami. Siko tayari kutoa kibali kwa Tathmini ya kwanza ya Aina Nyingi ya Nidhamu kwa Wenye Vipawa kwa wakati huu na ningependa kuzungumzia hili.
- Ninapinga Tathmini ya kwanza ya Aina Nyingi ya Nidhamu kwa Wenye Vipawa. Tafadhali usianze mchakato kwa wakati huu.
- Ninaomba upatanisho
- Ningependa usikilizaji wa kesi usiokuwa na upendeleo

Saini ya Mzazi

Tarehe

Nambari ya Simu ya Mchana:

Anwani ya Barua pepe:

(Herufi za kwanza za majina) Nimepokea nakala ya Taarifa ya Haki za Wazazi wa Wanafunzi Wenye Vipawa.

* Taarifa ilioambatanishwa ya Haki za Wazazi wa Wanafunzi Wenye Vipawa hutoa maelezo kuhusu chaguo zilizoorodheshwa hapa juu.