

Gifted and Talented Programs

6550 Sevenoaks Avenue Baton Rouge, LA 70806 Office 225-929-8642, Fax 225-929-8743

www.ebrschools.org

STUDENT'S NAME:		Incoming Grade:
STUDENT'S CURRENT SCHOOL:		ID#
STUDENT'S ADDRESS:		Zip
PARENT'S NAME:		
EMAIL ADDRESS:		
PHONE: (H)	_(C)	(W)
 (Total Reading/ELA, Total administered within the past I understand that my child unweighted grade point aver I understand my child must of the large attached the most current. 	Mathematics, Total Science, Total 3, 12 months. 's current and future report cards rage, which is the requirement to remain to the requirement of the second	
Parent's signature By signing this application,	you <u>understand</u> and <u>agree</u> to adh	Date ere to the Conditions stated above.
	For Office Use Only	
DATE RECEIVED EF	BR PERSONNEL SIGNATURE	
GPA TEST SCORES PROVIDED (Attach a copy of most recent standardized test results a		Eligible: YES / NO (Circle one.)
ATTENDANCE ZONE:	<u> </u>	
SCHOOL ASSIGNED:		
CAPITOL MIDDLE	WESTDALE MIDDLE	MCKINLEY HIGH
GLASGOW MIDDLE	WOODLAWN MIDDLE	[WOODLAWN HIGH]
SUPERVISOR'S SIGNATURE		DATE
□ APPROVED □ DISAPPROVED/RE	EASON:	
Original – Gifted Office	Yellow – School Conv	Pink – Parent Copy