

**Parkway Local Schools
Permission for Assessment**



To the Parents/Guardian of: _____ Grade: _____

Your child has been referred as a potentially gifted child. Assessments are required for identification purposes. The evaluation would be administered at school during the school day by one or more of the following special services personnel:

Gifted Programs Supervisor – Wendi Moorman

School Psychologist – Deb Tuneberg

Gifted Teacher – Katie Kraner

No assessment will be done without your written permission. Please read the information below and return it to the Mercer County Educational Service Center as soon as possible. If you have questions, or would like more information, please contact Wendi Moorman at the Mercer County Educational Service Center at wendi.moorman@mercercountyesc.org or at 419-586-6628.

Please check the appropriate box, sign, and return

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 qualifies, according to the State of Ohio criteria, for gifted identification.

I also understand that because the State has provided limited funding for local Gifted Services, it is possible to meet the State definition for Gifted Identification but not qualify for Gifted Intervention Services.

- Permission is given to conduct the assessment(s)
- Permission is denied

Signature

Relationship to Child

Date

Please return in enclosed envelope as soon as possible.