## Southwest Charlotte STEM Academy AIG Consent for Evaluation

Date:	Stud	ent:	
Grade:	D.O.B	Teacher:	
Your child has been nominated for gifted education services and based on screening			
results it has be	een determined that a	dditional data may be needed to determine	
eligibility for giff	ed programming.		
This process includes collecting data from achievement tests, aptitude tests and			
academic recor	ds. A summary of all o	data will be shared with you as soon as possible.	
Sufficient data is in place. No further testing is necessary.			
Further t	esting is necessary to	determine eligibility for your child (aptitude and/o	or
achievement).			
(Parent/Guardian: please check the box that applies.)			
I underst	and that sufficient data	a is available and that by signing this document	
give consent to	use available testing	data for AIG placement.	
I agree f	or my child to take an	aptitude and/or achievement test.	
Parent Signatur	re:	Date:	