

Southwestern Consolidated Schools High Ability Appeal Form

Date _____

Appeal is requested on behalf of:

Student _____

Parent/Guardian _____

Address _____ Zip Code _____

Phone _____ School _____

High Ability placement is requested for the following area(s) of academics:

Reasons presented for placement consideration:

Appeal requested by:

Relationship to student:

Please attach samples of student class work that demonstrate the student's aptitude in the academic area(s) being evaluated. Students or parents requesting an appeal may provide testing from an outside source, but are responsible for any costs incurred.

Return completed paperwork to school office addressed to the High Ability Coordinator.