This three-part application form must be completed by the student and parent and returned to Belinda Rippon at Accomack County Public Schools no later than **Friday, May 8, 2020.** Please distribute the teacher recommendation forms to the teachers you list on the student application.

PART ONE

Name:					
Present Grade in School (2019 – 2020): 5 th Gr	rade: \Box , 6	S^{th} Grade: \Box ,	7 th Grade: 🗌	(Mark only One).	
Home Address (Both 911 AND Mailing Required 911 Address:					
Mailing Address:					
Name of Parent\Guardian:					
Home Phone:	Emergend	cy (Daytime) P	hone:		
School Division:	School:				

If selected for the program, I promise to conduct myself in a safe and responsible manner at all times. I understand I am expected to follow the code of conduct required during the regular school year. Also, I understand I will be required to participate fully in all of the educational activities that are part of the program. As a participant in the program, I will also complete an individual science project. I understand that a lack of participation, or absence for more than 2 days may result in dismissal from the program.

Student's Signature: _____

Parent's\Guardian's Signature: _____

I understand that if my child is selected, bus transportation will be provided to and from Nandua Middle School. I understand the program will include properly supervised field experiences where safety will remain the utmost concern. Any behavior which threatens the safety of the student or others will result in immediate dismissal from the program. I also understand that active participation and consistent attendance as outlined above are expectations. Finally, I understand that the Site Coordinator or the Program Director will notify me if any of the above factors impact my child's ability to continue participation in the program.

PART TWO

Please list the name of your Gifted Education teacher and one additional teacher at your *home school* to be used as references in the selection process.

Gifted Education Teacher:		
School:		
School Address:		
Phone:		
Home School Teacher:		
School:	-	
School Address:		
Phone:		
Student Name:		
This student has been identified as gifted based on:		
□ Test Scores:		
Division Policy:		
□ Other (specify):		

Signature of guidance counselor or school principal: _____

PART THREE

In the space provided below:

1. Describe why you should be chosen to participate in the Summer Regional Governor's School Program. Please include a description of your personal learning characteristics and your interests as they may relate to this year's topic which is **Forensics**.

2. Describe your technology skills and ways that you may already use available technology to support your personal learning.

- 3. Write a 200 Word Essay on the topic: **The Importance of Forensics**. Your essay will be judged on grammar and mechanics, creativity, consistent flow, clarity of expression, and the ability to apply scientific principles and knowledge. The completed essay must be attached to and included with this application

Gifted Education Teacher's Recommendation

Gifted Educations Teacher's Name: _____

This student is applying for admission to the Regional Governor's School. The information requested on this form will be used in the selection process. Please complete and return by Friday, May 8, 2020 to:

Eastern Shore Summer Regional Governor's School Accomack County Public Schools 23296 Courthouse Avenue P.O. Box 330 Accomac, VA 23301 Attention: Belinda Rippon

Student's Name: _____

PARENT PERMISSION STATEMENT

Permission is herby given for the release of the information requested concerning my child.

Parent's\Guardian's Signature: _____ Date: _____

1. What course or program of studies under your supervision has the student taken?

2. Please estimate (by marking an X in the box) that best describes the extent to which the student demonstrated the qualities listed below:

Item	Demonstrated Qualities	Superior	Good	Fair	Poor
Α.	Demonstrates keen & insightful observations.				
В.	Curiosity about scientific processes.				
C.	Ability to work in collaboration with others.				
D.	An understanding of complicated material through analytical reasoning ability.				
E.	Reads about science-related topics in his or her free time.				
F.	Ability to articulate data interpretation.				
G.	Eagerly pursues opportunities to use technology.				
Н.	Demonstrates more advanced technology skills than other students his or her age.				
Ι.	Explains things precisely and clearly.				

3. On the next page, please add other comments about the student that would be helpful to the selection committee.

eacher Comments:	
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Gifted Educations Teacher's Signature:	 Date:
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Home School Teacher's Recommendation

Home School Teacher's Name: _____

This student is applying for admission to the Regional Governor's School. The information requested on this form will be used in the selection process. Please complete and return by Friday, May 8, 2020 to:

Eastern Shore Summer Regional Governor's School Accomack County Public Schools 23296 Courthouse Avenue P.O. Box 330 Accomac, VA 23301 Attention: Belinda Rippon

Student's Name: _____

PARENT PERMISSION STATEMENT

Permission is hereby given for the release of the information requested concerning my child.

Parent's\Guardian's Signature: _____ Date: _____

1. What course or program of studies under your supervision has the student taken?

2. Please estimate (by marking an X in the box) that best describes the extent to which the student demonstrated the qualities listed below:

Item	Demonstrated Qualities	Superior	Good	Fair	Poor
Α.	Demonstrates keen & insightful observations.				
В.	Curiosity about scientific processes.				
C.	Ability to work in collaboration with others.				
D.	An understanding of complicated material through analytical reasoning ability.				
E.	Reads about science-related topics in his or her free time.				
F.	Ability to articulate data interpretation.				
G.	Eagerly pursues opportunities to use technology.				
Н.	Demonstrates more advanced technology skills than other students his or her age.				
Ι.	Explains things precisely and clearly.				

3. On the next page, please add other comments about the student that would be helpful to the selection committee.

Teacher Comments:	

Dolle School Teacher's Signature. Date.	Home School Teacher's Signature:		Date:	
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