

**GIFTED AND TALENTED PROGRAM  
EAST BATON ROUGE PARISH SCHOOLS**

**REQUEST FOR SCREENING**

<b>STUDENT NAME</b>	<b>STUDENT IDENTIFICATION NUMBER</b>
<b>DATE OF BIRTH</b>	<b>GRADE</b>
<b>PARENT NAME</b>	<b>PHONE NUMBER</b>
<b>EXCEPTIONALITIES: (List all)</b>	<b>CURRENT SCHOOL</b>

As the parent/guardian of \_\_\_\_\_, I request the following screening be provided by the East Baton Rouge Parish School System:

**CHECK THE SERVICES THAT ARE BEING REQUESTED:**

**GIFTED**

**TALENTED THEATRE**

**TALENTED MUSIC**

**TALENTED VISUAL ART**

I understand that my child will be screened initially at the school level.

Talented candidates should be prepared to describe interest and experiences in the requested area and as listed below:

**Talented Theater** – a prepared monologue

**Talented Music** – an age appropriate prepared piece

**Talented Art** – submit three prepared works for evaluation

Should my child qualify for screening at the state level, I will be contacted and an SBLC will be conducted. State level screenings are conducted at the Goodwood Center, at 6550 Sevenoaks Drive.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date