

Old Town School Department
Gifted and Talented Services
Self Nomination Form

Name _____ Date _____

School _____ Grade _____

Teacher _____

Check the areas in which you feel you have special abilities or talents.

_____ General Intellectual Ability

“I usually answer questions quickly.” “Schoolwork is easy for me.”

_____ Written Expression

“I write poems, plays, and/or stories in my free time.”

_____ Reading

“The books in reading group are too easy for me.” “I read newspapers and other adult things easily.”

_____ Math

“I solve challenging math problems quickly.” “I enjoy working with numbers.”

_____ Science

“I make up science experiments to do on my own at home.”

_____ Social Studies

“I read about history, geography, and/or world cultures on my own time.”

“I enjoy reading or watching the news.”

_____ Art

“I have a passion for art and am constantly doing projects at home.”

_____ Music

“I greatly enjoy listening to music and creating music.”

In the space provided below, and on the back if you want, explain why you think you have special abilities or talents in the areas checked above. Include details of projects, activities, or reading to support your explanation.

Signature _____