



## Parent/Guardian Permission to Test Form

**WISCONSIN  
RAPIDS  
PUBLIC  
SCHOOLS**

I authorize permission for a Gifted & Talented evaluation for my child \_\_\_\_\_

The following assessments may be used:

- CogAt (Screening Assessment for Gifted Elementary and Middle School Students)
- TOMAGS (Test of Mathematical Ability for Gifted Students)
- TTCT (Torrance Test of Creative Thinking)
- Leadership checklist
- Portfolio evaluation
- Other \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**Please return completed form to school office**

*Office personnel, please route form to GATES Coordinator*