



# CONEJO VALLEY UNIFIED SCHOOL DISTRICT

1400 East Janss Road, Thousand Oaks, CA 91362 - (805)497-9511

## CONSENT & ASSESSMENT PLAN FOR GIFTED & TALENTED EDUCATION (GATE)

Student Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Grade: \_\_\_\_\_

School: \_\_\_\_\_ Teacher: \_\_\_\_\_

- If student speaks another language at home, please indicate here: \_\_\_\_\_
- Please check space provided if student has a current designation of: Special Education: \_\_\_\_ or Section 504: \_\_\_\_

Dear Parent/Guardian:

Your student has an opportunity to be assessed as part of the screening process to identify students that qualify for the Gifted and Talented Educational Program (GATE) within the Conejo Valley Unified School District (CVUSD). If your student is GATE identified, they will receive enhanced instruction with the intent to provide 1) academic growth, 2) challenge, 3) cognitive development, and 4) positive personal and interpersonal growth. Each school has a designated GATE facilitator to oversee the success of the program within your particular school.

CVUSD is dedicated to identifying students with unique and outstanding learning abilities to help them succeed. As part of the identification process, students are administered the Otis Lennon School Ability Test (OLSAT) which indicates students verbal, nonverbal, general reasoning, and problem-solving skills. This assessment does not require preparation. It assesses things the student already knows. Other considerations for GATE placement are academic performance, classroom functioning, teacher observations, and/or additional testing such as the Slosson Intelligence Test-R (SLOSSON), and Naglieri Nonverbal Ability Test (NNAT). The following professional(s) may be involved in the assessment; Student Support Services personnel, school psychologist and teachers.

Approximately 6 to 8 weeks after assessing your student, a notification letter of your child's eligibility will be sent home from your student's school site (or) mailed. Some students may be asked back for additional assessment before a decision can be made which will be indicated in your letter. Consent is mandatory for GATE services and must be in written form. Please complete and sign the required information below and **return to your student's teacher**, to allow them to be assessed.

### CONSENT FOR GATE TESTING

- YES, I give my permission to conduct the assessment of my student as indicated above.

### CONSENT FOR GATE PARTICIPATION

- YES, if my student is identified as GATE by the process above, I give my permission for him/her to participate in GATE programs.
- NO, permission is denied.

Parent/Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature

\_\_\_\_\_  
Print