



Erskine Park High School

Pride In Achievement

78--82 Swallow Drive, Erskine Park NSW 2759
 Website: www.erskinparkhs.com.au

Phone: 9834 3536 Fax: 9834 3864
 Email: office@erskinparkhs.com.au

Gifted & Talented Application

Parent Form

- **To be submitted with your EOI to the Primary School office by 23rd March 2018**
- Both forms need to be submitted. The child's current primary school teacher should fill out the 'Teacher Form' and return to you
- Please provide a portfolio to support your child's application. For example, recent reports, test results certificates or other achievements.

Student Information

Student Name: _____

Date of Birth: _____ Male or Female

Primary School: _____ Yr 6 Teacher: _____

Has your child sat the Higher Ability Selection Test? YES or NO

Parental Information

Parent/ Guardian Names: _____

Address: _____

Contact phone number/s: _____

Areas of Talent

Academic Examples of Evidence NAPLAN UNSW Competitions Year 5 Reports	<input type="checkbox"/> English <input type="checkbox"/> Maths <input type="checkbox"/> Science <input type="checkbox"/> Technology <input type="checkbox"/> Other _____	Debating / Public Speaking Examples of Evidence Certificates Letters	<input type="checkbox"/> Debating <input type="checkbox"/> Public Speaking <input type="checkbox"/> Other _____
Creative & Performing Arts Examples of Evidence Certificates Letters	<input type="checkbox"/> Music <input type="checkbox"/> Visual Arts <input type="checkbox"/> Drama <input type="checkbox"/> Dance <input type="checkbox"/> Other _____	Leadership Examples of Evidence Certificates Letters	<input type="checkbox"/> School Captain <input type="checkbox"/> Vice Captain <input type="checkbox"/> SRC <input type="checkbox"/> Sports Captain <input type="checkbox"/> Prefect <input type="checkbox"/> Other _____
Sport Examples of Evidence Certificates Letters Awards	<input type="checkbox"/> Athletics <input type="checkbox"/> Swimming <input type="checkbox"/> Rugby <input type="checkbox"/> Soccer <input type="checkbox"/> Other _____	Level: Zone Area State Club Rep Level: Zone Area State Club Rep Level: Zone Area State Club Rep Level: Zone Area State Club Rep Level: Zone Area State Club Rep	



Erskine Park High School

Pride In Achievement

78--82 Swallow Drive, Erskine Park NSW 2759
Website: www.erskinparkhs.com.au

Phone: 9834 3536 Fax: 9834 3864
Email: office@erskinparkhs.com.au

Gifted & Talented Application Teacher Form

Primary School: _____

Teacher: _____

Student name: _____

Please tick the appropriate boxes (When rating students, please think about the student compared to other children similar in age, experience or environment.)	6 Always	5 Almost always	4 Often	3 Usually	2 Rarely	1 Never
Is sensitive to larger or deeper issues of human concern						
Is self-aware						
Shows compassion for others						
Is a leader within his/her group of peers						
Effectively interacts with adults or older students						
Performs or <i>shows potential</i> for performing at remarkably high levels						
Is eager to explore new concepts						
Exhibits intellectual intensity						
Uses alternative processes						
Thinks "outside the box"						
Has intense interests						
Please indicate all content areas where the student shows talent:						
Math _____	Science _____	Reading _____	Creative Writing _____	Arts _____	Social Studies _____	
Other _____						
Please provide any additional information of comments:						

Teacher Signature: _____

Date: _____