

Expression of Interest for Entrance to the Roma Mitchell Secondary College Gifted & Talented Program



Roma Mitchell
Secondary College

Student's last nameFirst name(s)

Date of Birth.....Gender

Current SchoolCurrent year level

1. Describe the advanced behaviours and abilities of your child which suggest that he/she is gifted.

2. List, in order, the three things that your child enjoys doing:

3. List, in order, the two topics your child likes to discuss / debate:

4. What does your child consider to be a challenge?

5. Describe your child's attitude to learning and his/ her work habits.

6. In which extra - curricular activities is your child involved in at his / her school?

Parent/Caregiver Nomination Form
Gifted & Talented Program



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7. List the activities your child is involved in outside school:

8. Placement in the Gifted and Talented program involves the expectation that students participate in extra curricular activities such as competitions, debating, excursions and camps. In what ways could you support your child with these activities?

9. Please list any issues that may impact on your child's success in the program.

Parent/Caregiver's Name

Signature Date

Please return this completed application to Noel Hernes, Assistant Principal, International Baccalaureate Middle Years, International and Gifted & Talented Programs.



noel.hernes@rmsc.sa.edu.au



(08) 8161 4600



Roma Mitchell Secondary College Briens Road, Gepps Cross SA 5094

Parent/Caregiver Nomination Form
Gifted & Talented Program



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1. In which curricular area/learning(s) does this student demonstrate advanced abilities?

2. In which curricular area/learning(s) does this student underachieve or have difficulty?

3. Outline any extra-curricular activities the student has been involved in or other special interests or achievements (including results in competitions eg, Uni NSW, Young Writer's Awards, Tournament of the Minds)

4. Describe the student's attitude to learning and his/her work habits.

5. Describe the student's relationship with others (peers and adults)

Teacher Nomination Form
Gifted & Talented Program



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Roma Mitchell
Secondary College

Level of cooperation in class

Poor Average Excellent

Ability to manage stress

Poor Average Excellent

YearNAPLAN results

Literacy Band

Numeracy Band

Writing Band

Do you recommend this student for the Gifted & Talents Program at the Multi Campus
Secondary School ? Yes ☐ No ☐

Teacher's Name


Signature Date

Principal's Name

Signature Date

*Please return this completed application to Noel Hernes, Assistant Principal, International
Baccalaureate Middle Years, International and Gifted & Talented Programs.*

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Teacher Nomination Form
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1. What are your particular strengths and abilities in relationship to learning and what do you find interesting/ challenging?

2. What are your special interests both in school and out of school? Are you involved in any clubs or special interest groups?

3. List three recent activities or experiences which you have enjoyed most at school and explain why.

Student/Self Nomination Form
Gifted & Talented Program

Cont'd



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Date of Birth.....Gender

Current SchoolCurrent year level

4. Explain why you would like to be in the Gifted and Talented class at the Multi Campus Secondary School and what you see as some of the benefits of being in that class.

Student's Signature.....

Date

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