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Curriculum and Instruction Division  
*Advanced Academic Services*

### PERMISSION TO TEST

I grant the El Paso Independent School District permission to administer the qualifying examination(s) for the gifted program to my child.

I understand that I must ensure that my son/daughter:

- is physically and mentally prepared to take the test(s) (is in good health)
- gets a good night's sleep
- eats a well-balanced breakfast in the morning
- knows that he/she should ask questions of the test administrator if something is not clear
- understands the importance of doing his/her best on the test(s).

I am responsible for deciding that my child is both physically and mentally prepared to take the test. If he/she is not, I will inform the principal and ask that my child be excused from testing that day. I further understand that if my child is not able to take the test as scheduled, I may call the school principal to postpone testing.

**Based on the original test date, a student will be allowed to *retake* a test once during a calendar year following a minimum waiting period of 90 calendar days.**

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Student Name

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Student's ID Number

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Date of Birth

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Current School

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Current Grade

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Home Address

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Zip Code

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Home Telephone Number

Parent's Signature

Date