

The 2010 Martin W. Essex School for the Gifted

SUPERINTENDENT AUTHORIZATION FORM

To be completed by the district superintendent:

I concur with the nomination of _____ to participate in the 2010
(nominated student)

Martin W. Essex School for the Gifted. Enclosed with this Superintendent Authorization Form are all application components, as indicated by the table below (please place a mark in the right-most column to verify each item's inclusion). This submission has been made on the basis of one nomination per every 10,000 EBE, or fraction thereof, in our district's jurisdiction, according to the October 2009 total district EBE figures.

District Superintendent Signature

Date

District Superintendent Information:

Name	
School District Name	
Office: Street	
City, State, Zip	
Telephone	
Email Address	

APPLICATION COMPONENT	INDIVIDUAL RESPONSIBLE FOR COMPLETION	VERIFICATION OF INCLUSION
Student Information Form (Web Form Copy)	Student	
Short Answer	Student	
Extended Essay	Student	
Teacher (A) Recommendation	Teacher (A)	
Teacher (B) Recommendation	Teacher (B)	
Parent / Guardian Permission Form	Parent / Guardian	
District Representative Form	District Representative	
Student Eligibility Confirmation Form	District Representative	
Superintendent Authorization Form	District Superintendent	

Completed application packet must be postmarked by March 22, 2010 to:

Essex School Nominations
School Study Council of Ohio
936 Eastwind Drive, Suite 100
Westerville, Ohio 43081
Telephone: (614) 785-1163