

# Mississippi Association for Gifted Children

## Summer Gifted Studies Program Scholarship Nomination Form

Deadline: MONDAY - FEBRUARY 16, 2009



Nominee's Name: \_\_\_\_\_  
(Prior MAGC scholarship recipients are not eligible to receive this award)

Address: \_\_\_\_\_  
\_\_\_\_\_

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

School Address: \_\_\_\_\_  
\_\_\_\_\_

Grade: \_\_\_\_\_ Age: \_\_\_\_\_ Program Choice: \_\_\_\_\_  
(Must be a Mississippi program)

Signature of Nominee: \_\_\_\_\_ Date: \_\_\_\_\_

### To the Nominating Teacher:

**Please include the following information with this nomination form:**

1. A narrative describing student's special interests, school and community involvement, honors, and your reasons for nominating this student; indicate a financial need.
2. A copy of the student's G.P.P.D.S. verifying eligibility.
3. A narrative from the student stating his/her areas of interest and choice of Mississippi program if awarded the scholarship.
4. Additional letters of support may be included.

Please mail completed nomination form and other required attachments to:

**Dr. Sandra Manning**  
166 Jeff Byrd Road  
Laurel, MS 39443

*Thank you for taking advantage of this opportunity for your student.*