



DISTINGUISHED GIFTED TEEN AWARD

The purpose of this award is to recognize a student currently between the ages of 13 to 17 who has demonstrated giftedness, dedication, creativity, and a desire to help others. Students may self-nominate or be nominated by another individual. The award will consist of a \$500 scholarship to be used toward the cost of summer camp, college, or other appropriate activity related to his/her academic work.

Procedure:

The nomination packet must include:

- 1) Completed nomination form (next page)
- 2) One letter of recommendation from a teacher or principal who is not a family member of the student. The letter should explain why the student is deserving of the award, what sets him or her apart from others, and how the nominee is impacting others. (Maximum of two pages.)
- 3) One letter of recommendation from a community or civic leader who is not a family member of the student. The letter should explain why the student is deserving of the award, what sets him or her apart from others, and how the nominee is impacting others. (Maximum of two pages.)
- 4) 750-word composition written by the student that responds to each of the following questions:
 - a) What is the activity or interest area for which the student is being nominated?
 - b) How did the student become interested/involved in the activity?
 - c) What impact has the activity had on the student and on others?
 - d) How have the student's future plans and goals been affected by this activity or interest area?
- 5) A Release Form completed and signed by a parent or guardian (page 3)

Recognition:

The award recipient will be acknowledged with a plaque presented at the annual convention, a letter of recognition from the GAGC President, and up to \$500 to be paid by GAGC directly to a summer camp, college, or other appropriate activity related to the student's academic work.

Nominations shall be submitted by November 30.

Complete online, mail, or fax application to:

GAGC Awards Committee
1579F Monroe Drive, #321
Atlanta, GA 30324
Fax: 404-875-2284



DISTINGUISHED TEEN AWARD APPLICATION

Nomination Form

Date of Nomination: _____

Name of Nominee: _____

Nominee Home Address: _____

Nominee City, State, Zip Code: _____

Birth Date: _____ Grade at time of Nomination: _____

Name of Parent/Guardian: _____

Parent/Guardian's Home Address: _____

Parent/Guardian's City, State, Zip Code: _____

Parent/Guardian's E-mail: _____

Parent/ Guardian's Daytime Phone: _____ Evening Phone: _____

Nominee's School Name: _____

Nominee's School Address: _____

Nominee's School City, State, Zip Code: _____

Name of Nominator: _____

Nominator Home Address: _____

Nominator City, State, Zip Code: _____

Nominator E-mail: _____

Nominator Daytime Phone: _____ Evening Phone: _____

Nominator GAGC Membership Status: _____



GAGC - Distinguished Teen Award

RELEASEFORM

I hereby give the Georgia Association for Gifted Children (GAGC) permission to use my son/daughter's photo* and composition, submitted in connection with the GAGC Distinguished Teen Award, in any publicity or announcements GAGC may make about the award or the award winners, should my son/daughter be selected for the award.

I further grant permission to GAGC to use my son/daughter's name, school name, and city and state in any publicity or announcement that uses his/her composition, and to make edits to the length of the composition as may be necessary.

I understand that neither I nor my son/daughter will receive any remuneration in connection with this permission and understand that the composition will not be returned to me.

Signature: _____

Parent's Name (please print): _____

Address: _____

City/State/Zip: _____

Daytime Phone _____ E-mail: _____

Name of Nominee: _____

Date: _____

*GAGC may request a photo of the award winner for use in award publicity and announcements.