

GIFTED MATH NOMINATION FORM

How did you hear about GMP?

- School
 Radio
 Newspaper
 GMP family
 Other

_____ M F
 Student's Last Name First Name Middle Name Gender (circle one)

 Parent(s) or Guardian(s) Name(s)

 Home Address

 City State Zip

 Phone Parent E-mail

 Student's Current School Student's Current Year in School

 Student's School Next Year (if different)

 Yes No
 Ethnicity Sibling in GMP (circle one)

 Signature of Person Nominating Candidate

 Printed or Typed Name

Nominations should reach the GMP office by January 23

PLEASE MAIL TO: GIFTED MATH PROGRAM
 University at Buffalo
 436 Baldy Hall
 Buffalo, NY 14260-1000

OR FAX TO: (716) 645-6841

THIS FORM MAY BE DUPLICATED AS NEEDED