



University at Buffalo
The State University of New York

Gifted Math Program

GIFTED MATH NOMINATION FORM

How did you hear about GMP?

- School
 Radio
 Newspaper
 GMP family
 Other

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

_____ 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)

_____ Ethnicity Sibling in GMP (circle one) Yes No

_____ Signature of Person Nominating Candidate

_____ Printed or Typed Name

Nominations should reach the GMP office by January 23

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

OR FAX TO: (716) 645-6841

THIS FORM MAY BE DUPLICATED AS NEEDED