

Summer Quest Student Name _____ Current Grade _____

PARENT ACTIVITY, TRIP PERMIT, AND LIABILITY INDEMNIFYING RELEASE

_____ (my child) has my permission to participate in classes, supervised internet use, activities, and field trips with Summer Quest, an enrichment program sponsored by Drury University, Springfield Public Schools, and the Parents and Advocates for Gifted Education, Inc. I accept full responsibility for my child. If an accident should occur, injuring my child, including loss of life or limb, I hereby release the teacher, driver, sponsors, administrators, or other associated persons from any liability thereon. I further agree that I will indemnify and hold harmless all such persons and organizations from any loss, cost, judgment or other harm, including attorneys' fees, which might come to them if my child or anyone claiming by or through my child should ever institute litigation against any such persons or organization for any reason touching upon or arising from my child's Summer Quest experience. This agreement binds my heirs and successors. I also grant permission for Summer Quest or its designate to photograph, record or video my child during Summer Quest activities and to use those materials for promotional or other purposes chosen by Directors of the Pre-College Board.

Parent/Guardian _____ Date _____

SCHOOL CERTIFICATION OF QUALIFICATION FOR SUMMER QUEST Please indicate with an "X" one of the possible ways (I, II, or III) in which the above student qualifies for the Summer Quest Program. Fill in the proper certification statement completely, signing and dating the verification statement.

I THE STUDENT ATTENDED SUMMER QUEST IN 2010 AS A 2nd, 3rd, or 4th GRADER.

This is to certify that _____ attended Summer Quest last year after completing _____ grade. Parent/Guardian _____ Date _____

II THE STUDENT PRESENTLY ATTENDS A MISSOURI STATE-FUNDED GIFTED PROGRAM.

This is to certify that _____ presently attends a state-funded program in _____ grade.
Signature of School Official _____ Title _____
School _____ Date _____

III THE STUDENT HAS QUALIFYING IQ AND ACHIEVEMENT THAT MEET MO STATE CERTIFICATION.

A. IQ - Student must qualify by one of the two ways listed below:

1. _____ One individual IQ (must be at **120** or above) IQ: _____ Test: _____ Date: _____
2. _____ Two group IQ scores (each at **120** or above) IQ: _____ Test: _____ Date: _____
IQ: _____ Test: _____ Date: _____

B. In addition to the IQ, the student must show achievement in one of the 4 ways listed below. Please indicate.

(Please be sure to sign as an official school representative at the end of this section.)

1. _____ MAP (Student must have 2 subtests at or above the **90th** percentile).
Subtest _____ %ile _____ Date _____
Subtest _____ %ile _____ Date _____
2. _____ Group Achievement (Student must have 95th percentile on two subtests on achievement test).
Subtest _____ %ile _____ Date _____
Subtest _____ %ile _____ Date _____
3. _____ Final Grade Point Average of 3.0 or above on core curriculum subjects:
GPA: _____ Date: _____ Subjects included: _____
4. _____ Schools using only Portfolio Assessment must submit written documentation verifying the student's portfolio exhibits that he/she performs at the 95%ile in creativity, problem-solving, and higher-level thinking. Please give specific examples.

This is to certify that _____ meets the qualifications for Summer Quest in **both** IQ and Achievement.
School Official _____ Title _____
School _____ Date _____