



# LOUDOUN COUNTY PUBLIC SCHOOLS

DEPARTMENT OF INSTRUCTIONAL SERVICES

GIFTED EDUCATION

21000 Education Court, Suite 505

Ashburn, VA 20148

Phone (571) 252-1440 Fax (571) 252-1635

## APPEALS FORM

Gifted Education

Student Name \_\_\_\_\_  
Last First

School \_\_\_\_\_ Grade \_\_\_\_\_

SEARCH/SPECTRUM Teacher \_\_\_\_\_

The reason for appealing the ineligible status: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Contact Information:

Parent(s)/Guardian(s) Name (please print) \_\_\_\_\_ Phone Number \_\_\_\_\_

Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please send the completed form to: Loudoun County Public Schools  
Gifted Education  
21000 Education Court  
Ashburn, VA 20148