

**Kings Local School District**  
**Process for Gifted Identification in K- 6 Performing Arts**

**Step 1:** An educator, parent, or student may submit a referral form requesting an evaluation for visual/performing arts assessment (**PAGE 2**). All referrals must be received by February 15.

**Step 2:** The parent or guardian gives permission for the evaluation process (**PAGE 3**).

**SUBMIT DOCUMENTS FROM STEP #1 AND STEP #2 TO YOUR CHILD’S BUILDING PRINCIPAL**

**Step 3:** Evaluators will hold a music audition during the month of May.

**MUSIC AUDITION**

1. The following behaviors as indicated by the state of Ohio typifies a student who might be identified as gifted in music:

- Matches pitch accurately
- Is able to duplicate complex rhythms correctly
- Demonstrates unusual ability on an instrument, and/or voice
- Has a high degree of aural memory/musical memory
- Displays compulsive musical pursuit
- Seems to pick up skills in the arts without instruction

2. For instrumental audition

- Play two contrasting pieces of your choice (bring 6 copies for the assessors)
- May be asked to replicate rhythmic patterns and melodic phrases as requested by assessors
- Perform melodic and rhythmic improvisations as requested by assessors

3. For vocal audition

- Sing two prepared solos – check with your music teacher about appropriateness of selections and accompaniment
- Perform echo pitch matching and improvisations as requested by assessors

If your child is identified as gifted in performing arts, his/her teacher will be informed and may use this information to help provide appropriate educational experiences for your child. At this time, there are not separate classes for students identified as gifted in performing arts. Ohio has a mandate to identify gifted students, but there is no mandate or funding to provide service for performing arts.

If you have any questions, please contact your child’s music teacher.

**Kings Local School District  
Performing Arts Referral**

Please complete all parts of the referral form:

**Part I: Referral Information**

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

Address \_\_\_\_\_ City, State,

Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Email address \_\_\_\_\_

Teacher \_\_\_\_\_

Check areas in which the student is being referred:

- Music
- Drama
- Vocal
- Instrumental (Instrument name \_\_\_\_\_)
- Dance

**Part II: Student Profile**

1. Has the student taken private lessons in the area checked above?

- No
- Yes      How many years? \_\_\_\_\_  
Name of studio or teacher \_\_\_\_\_

2. Is the student enrolled in a school performing arts class?

- No
- Yes      How many years? \_\_\_\_\_  
How often does the class meet? \_\_\_\_\_  
How long are the classes? \_\_\_\_\_

3. Does the student participate in arts-based extracurricular activities or clubs?

- No
- Yes      How many years? \_\_\_\_\_  
Please list \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Please write any additional **relevant** information below (use back if necessary):

**Part III: Visual/Performing Arts Gifted Identification Permission to Test**

Parent permission must be given to continue the assessment process.

**PERMISSION FOR ASSESSMENT:**

I understand that if I grant permission, my child will receive assessment(s) by trained evaluators and that the information may be shared with teachers, principals, and other appropriate school personnel. I will be informed of whether or not my child qualifies, according to the State of Ohio criteria, for gifted identification in the visual and performing arts area.

***I give my permission for the following assessments:***

- Visual art – Specific area \_\_\_\_\_
- Performing Art – Specific area \_\_\_\_\_

Child's name \_\_\_\_\_

Parent's name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email address \_\_\_\_\_

**Please submit pages 2 and 3 to your child's building principal.**