



**Gifted & Talented Program
Furlough / Exit Form**

Student's Name: _____ Date: _____

- Teacher recommendation for one-year furlough from program, effective _____
- Voluntary furlough per student or parent request, effective _____
- Voluntary exit per student or parent request, effective _____

Reason for furlough / exit from program:

Student Signature / Date

Parent Signature / Date

Teacher Signature / Date

Campus Administrator / Date