

Gifted and Talented Pathway

Parent/Guardian and Principal Endorsement

School Name School Name: Position: Signature: Date: Parent/Guardian Name: Date: Signature: Date: Date: Parent/Guardian Name: Position in this pathway. I also acknowledge that from time to time classes may be held outside the school and that independent travel arrangements will need to be made by myself. I acknowledge that Macquarie University is not responsible for the academic progress of my son/daughter. I give my consent for any photographs or material that my son or daughter appears in to be used by the university for promotional materials. Parent/Guardian Name: Signature: Date:						
SCHOOL ENDORSEMENT I fully support the above student's application for the Gifted and Talented Pathway at Macquarie University. I certify that this student has demonstrated a strong commitment to study throughout high school and would be a good candidate for this Pathway. Name: Position: Signature: Date: Date: PARENT/GUARDIAN ENDORSEMENT I hereby give permission for my son/daughter to study under the Gifted and Talented Pathway at Macquarie University alongside their Year 11 or Year 12 studies. I agree to support and facilitate, where possible or necessary, my son/daughter's participation in this pathway. I also acknowledge that from time to time classes may be held outside the school and that independent travel arrangements will need to be made by myself. I acknowledge that Macquarie University is not responsible for the academic progress of my son/daughter. I give my consent for any photographs or material that my son or daughter appears in to be used by the university for promotional materials. Parent/Guardian Name:						
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