STUDENT NOMINATION

To be completed by the nominator. Please complete the following information about the student you are nominating to participate in TLI. Once completed, you may email to tli@cs.pitt.edu, fax to 412-624-8854 or send it to the TLI Office in a signed and sealed envelope (envelope not provided). The student will be contacted and encouraged to apply. We thank you in advance for taking the time to nominate a student.

STUDENT INFORMATION

Name: _____
          Last   First   Middle

Address: _____
          Street   City   State   Zip

Home Phone: _____

Email: _____

Current Grade Level: __ 8   __ 9   __ 10   __ 11

Current School: _____

NOMINATOR INFORMATION

Name: _____
          Last   First   Middle

Address: _____
          Street   City   State   Zip

Phone: _____ Email: _____

Email: _____

QUESTIONS

1. How long have you known the student and in what capacity?

_____
_____
_____
_____
_____
_____

2. Why are you nominating this student for TLI?

_____
_____
_____
_____
_____
_____

Comparison Rating: In comparison to other youth, this student is:

☐ Exceptional   ☐ Above Average   ☐ Average   ☐ Below Average

Signature _____ **Date** _____