

Georgia Association for Gifted Children

An affiliate of the National Association for Gifted Children

REQUEST FOR ENDORSEMENT FORM

Submit to: mailto:executiveboard@gagc.org

| Organization or Co | ompany: | | | | |
|--------------------|-----------------------|---|----------------------|---------------------------|-----|
| | | | | | |
| | | | | | |
| Email Address: | | | | | |
| Website: | | | | | |
| Phone: | | | | | |
| Mailing Address: _ | Street | City | State | Zip | |
| | | | | are seeking endorseme | ent |
| 2) Describe the r | ationale for obtainir | ng GAGC's endorsen | nent. | | |
| | | ected from GAGC and dorsement be leverage | | n expect in return for th | nis |
| Note: Additional | information may be | e requested to confirm | n the quality and st | anding of the program | , |

product, service, or company requesting the endorsement.