

Gifted and Talented Student Services Plan
Wolfe County Schools
Programs for the gifted and talented.

Student: _____ Student Identification Number: _____ School: _____

Gender: Male Female Date of Birth: _____ Classroom/Homeroom Teacher: _____ Grade Level: _____

African-American
 Asian-American/Pacific Islander
 Caucasian
 Hispanic
 Native American/Alaskan Native
 Other not on the list

Listed below are instructional strategies that collectively contribute to the continuous progress of a formally identified student and encourage that student to construct content connections, explore concepts/themes laterally, and pursue ideas/themes/concepts/topics to intensity.

Section 7. Curriculum (2) "A school shall differentiate, replace, supplement, or modify curricula to facilitate high level of attainment of the learning goals established in KRS 158.6451 and to assist students identified as gifted and talented to further develop their individual interests, needs, and abilities."

This student identified as possessing demonstrated or potential ability to perform at an exceptionally high level in:

GIA SAA GRE LEA VPA

will demonstrate continuous progress in content areas, process skills, goal setting, self-directed learning, and decision making as evidenced by:

Compacting Curriculum Includes the following and will be evidenced as checked:	Independent Inquiry Includes the following and will be evidenced as checked:	Demonstration of Learning occurs through products (that) and will be evidenced as checked:	Understanding and application of thinking skills Includes these categories and will be evidenced as checked:
<input type="checkbox"/> Acceleration of content <input type="checkbox"/> Horizontally/Laterally <input type="checkbox"/> Vertically <input type="checkbox"/> Modifications <input type="checkbox"/> Content <input type="checkbox"/> Process <input type="checkbox"/> Learning Environment <input type="checkbox"/> Pre and post-assessment <input type="checkbox"/> Tiered assignments	<input type="checkbox"/> Content/Content-related connections <input type="checkbox"/> In-depth exploration using multiple and varied primary and secondary resources <input type="checkbox"/> Student-selected original research <input type="checkbox"/> Engagement to form/solve a problem <input type="checkbox"/> Study of a theme and generalizations <input type="checkbox"/> Student formulation of plan for self-direction	<input type="checkbox"/> Encourage construction content/content-related connections <input type="checkbox"/> Culminate horizontal/lateral or vertical topic exploration <input type="checkbox"/> Result from pursuing to intensity topics of interest or passion <input type="checkbox"/> Student determines is appropriate <input type="checkbox"/> Incorporate multiple intelligences	<input type="checkbox"/> Analytical thinking <input type="checkbox"/> Creative thinking <input type="checkbox"/> Critical thinking <input type="checkbox"/> Organizational thinking

If applicable, this box must be completed.

<input type="checkbox"/> Physical disability	<input type="checkbox"/> Orthopedic impairment	<input type="checkbox"/> Other health impairment	<input type="checkbox"/> Communication disorder
<input type="checkbox"/> Speech/Language impairment	<input type="checkbox"/> Mental disability	<input type="checkbox"/> Specific learning disability	<input type="checkbox"/> Emotional-behavioral disability
<input type="checkbox"/> Multiple disability	<input type="checkbox"/> Deaf/Hearing impairment	<input type="checkbox"/> Blind/Visual Impairment	<input type="checkbox"/> Developmental Delay
<input type="checkbox"/> Traumatic brain injury	<input type="checkbox"/> Autism		

Gifted Student Services Plan Committee Meeting Date _____ GSSP Committee Meeting Chairperson _____

Administrator _____ Gifted and Talented Coordinator or Gifted Education Teacher/Resource Specialist _____ Classroom/Content Area Teacher _____ Counselor _____

Special Education Teacher (as appropriate) _____ Other personnel (as appropriate) _____

See back of form for multiple delivery service options and personnel responsible.

- Parent/Guardian information obtained for use in determining appropriate services related to child's interests, needs, and abilities
 - Parent/Guardian notified regarding specific procedures to follow in requesting a change in services for her/his child
 - Parent/Guardian notified of progress report once a semester for her/his child related to the gifted and talented student services plan
- Date: _____ Note: _____
- Date: _____ Note: _____
- Date: _____ Note: _____