



**Highly Capable Program
Educator Identification Form**

Student Name _____ Date _____

School _____ Grade Level _____

Identifying Teacher _____

Reason for Identification:

I am identifying this child as a possible candidate for Highly Capable Program services because:
(Please supply your observations of the student's abilities, achievements, creativity and/or motivation as well as any unique or unusual circumstances that you think should be included when reviewing student data.)

Differentiation:

Because the student is performing, or has the potential to perform, well above grade level, I am currently modifying curriculum and instruction for this student in the following ways:

Please complete the attached teacher rating scales and return them along with this cover sheet to the State & Federal Programs secretary at the district office. Thank You!