

Carter County Schools
Gifted and Talented Educational Services
 228 South Carol Malone Boulevard Grayson, KY 41143 (606) 474-6696
Collection of Documentation/Evidence for Formal Identification – Grades 4 – 12

Student Name: _____

Last
First
Middle
Nickname

Date of Birth ___/___/___ **School/Grade:** _____ **School/Grade:** _____ **School/Grade:** _____

Date(s) Reviews: _____

<p style="text-align: center;">Area(s) of Consideration: (Check all that apply)</p> <p><input type="checkbox"/> General Intellectual Ability Date of Identification _____</p> <div style="border: 1px solid black; padding: 2px; text-align: center; background-color: #f0f0f0;">Specific Academic Aptitude</div> <p><input type="checkbox"/> Reading/Language Arts Date of Identification _____</p> <p><input type="checkbox"/> Math Date of Identification _____</p> <p><input type="checkbox"/> Science Date of Identification _____</p> <p><input type="checkbox"/> Social Studies Date of Identification _____</p> <div style="border: 1px solid black; padding: 2px; text-align: center; background-color: #f0f0f0;">Leadership</div> <p>Date of Identification _____</p> <p><input type="checkbox"/> Music – Inst./Vocal Date of Identification _____</p> <p><input type="checkbox"/> Dance Date of Identification _____</p> <p><input type="checkbox"/> Drama Date of Identification _____</p> <p><input type="checkbox"/> Creativity Date of Identification _____</p> <div style="border: 1px solid black; height: 100px; margin-top: 10px; padding: 5px;"> <p>NOTES:</p> </div>	<p style="text-align: center;">General Intellectual Ability</p> <p style="text-align: center;">Evidence (At least <i>three</i> areas <u>must</u> be checked. Starred item is required.)</p> <p>___ *Achievement of 9th stanine (96% or higher at national level) on full-scale comprehensive test of intellectual ability (OLSAT). (Total verbal and non-verbal score compared to others of same age) DATE _____ SCORE _____ TEST NAME _____</p> <p>___ Achievement of 9th stanine (96%) on ITBS. DATE _____ SCORE _____</p> <p>___ Inventory checklist completed by teacher indicating consistent behaviors.</p> <p>___ Student portfolio or work samples that show evidence of exceptionally high level compared to peers. (Attached)</p> <p>___ Checklist inventories of behaviors specific to underachieving or disadvantaged learners.</p> <p>___ Recommendation by teacher. Evidenced by _____</p> <p>___ Checklist inventories of behaviors completed by parent indicating consistent behaviors.</p> <p>___ Checklist inventories of behaviors completed by peers indicating consistent behaviors.</p> <p>___ Checklist inventories of behaviors completed by student indicating consistent behaviors.</p> <p>___ Checklist inventories of behaviors completed by other indicating consistent behaviors. Specify: _____</p> <p>___ Observation of applied advanced reasoning ability 1 ½ - 2 years above peers. Date documented: _____</p> <p>___ Evidence of formal identification in another KY district or another state. District: _____ State: _____ (records attached)</p> <p>___ Continuous progress data i.e., report card, learning logs, progress reports, etc.</p> <p>___ Other assessments as outlined in 704 KAR 3:285 Section 3; 11(b) & 12(a) Specify: _____</p> <p>___ Academic awards/Honors Specify: _____</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px; background-color: #f0f0f0;"> <p>The Gifted and Talented Identification and Placement Committee feels that the evidence ___meets___ does not meet the requirements for the formal identification of the above student at this time and support the need for gifted for gifted and talented services. Date: _____</p> <p>Committee Members: _____</p> <p>_____</p> </div>
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Specific Academic Aptitude

Evidence (At least *three* criteria must be checked for each Specific Academic area. At least one starred item is required.)

- ___ *Achievement of 9th stanine (96%) on ITBS.
- ___ Reading ___ Language ___ Math ___ Social Studies **Total** ___ **Date:** ___
- ___ Reading ___ Language ___ Math ___ Social Studies **Total** ___ **Date:** ___
- ___ Student work samples or portfolio that shows evidence of working 1 ½ 0 2 years above age peers. (Attached)
- ___ Behavior checklist completed by teacher: ___ Language Arts ___ Math ___ Science ___ Social Studies
- ___ Achievement of 96th percentile on KCCT. **Date administered:** _____
- ___ Reading ___ Math ___ Science ___ Social Studies ___ Writing Portfolio ___ On Demand
- ___ Behavior checklist completed by parent: ___ Language Arts ___ Math ___ Science ___ Social Studies
- ___ Behavior checklist completed by student: ___ Language Arts ___ Math ___ Science ___ Social Studies
- ___ Behavior checklist completed by peers: ___ Language Arts ___ Math ___ Science ___ Social Studies
- Specify title/position:** _____
- ___ Awards/Honors Specify: _____
- ___ Student progress data i.e., report cards **Specify with dates:** _____
- ___ Evidence of formal identification in another Kentucky district/state.
- District:** _____ **State:** _____ **Area of Identification:** _____ (Records attached)
- ___ Other assessments as outlined in 704 KAR 3:285 Section 3; 11(b) & 12(a) i.e. STAR scores
- Specify: _____

Visual and Performing Arts

- Evidence (A minimum of *three* criteria per area of identification must be checked.)**
- ___ Auditions/Adjudications/Portfolio Area(s): ___ Art ___ Music ___ Dance ___ Drama (evidence attached)
 - ___ Behavior checklists/Surveys completed by parent. Area(s): ___ Art ___ Music ___ Dance ___ Drama
 - ___ Behavior checklists/Surveys completed by classroom teacher. Area(s): ___ Art ___ Music ___ Dance ___ Drama
 - ___ Behavior checklists/Surveys completed by specialty teacher. Area(s): ___ Art ___ Music ___ Dance ___ Drama
 - ___ Letters of recommendations or portfolio assessment by a professional outside of school.
 - Area(s):** ___ Art ___ Music ___ Dance ___ Drama **Specify title/position:** _____
 - ___ Student resume. **Area(s):** ___ Art ___ Music ___ Dance ___ Drama
 - ___ Self-Survey/Student interview completed by student. **Area(s):** ___ Art ___ Music ___ Dance ___ Drama
 - ___ Anecdotal records. **Area(s):** ___ Art ___ Music ___ Dance ___ Drama **Specify Source:** _____
 - ___ Awards/Critiques. **Area(s):** ___ Art ___ Music ___ Dance ___ Drama (Evidence attached)
 - ___ Peer survey/Sociograms. **Area(s):** ___ Art ___ Music ___ Dance ___ Drama
 - ___ Formal recommendation or referral. **Area(s):** ___ Art ___ Music ___ Dance ___ Drama
 - ___ Evidence of formal identification in another KY district/state.
 - District:** _____ **State:** _____ **Area of Identification:** _____ (Records attached)
 - ___ Other assessments as outlined in 704 KAR 3:285 Section 3; 11(b) & 12(a) i.e. KCCT Scores **Specify** _____

Leadership

- Evidence (A minimum of *three* criteria must be checked.)**
- ___ Self rating scale for leadership
 - Score:** _____ **Date:** _____
 - ___ Behavior checklist completed by teacher
 - ___ Assume/elected to leadership roles in the classroom, school, organization, or community.
 - Specify:** _____
 - ___ Behavior checklist completed by parent.
 - ___ Behavior checklist completed by peer.
 - ___ Behavior checklist completed by other.
 - Specify title/position:** _____
 - ___ **Survey/Assessment/Sociograms**
 - ___ **Teacher** ___ **Parent** ___ **Self** ___ **Peer**
 - ___ **Portfolio entries, which display leadership qualities. Specify:** _____
 - ___ **Evidence of formal identification in another KY district or state. District:** _____
 - State:** _____ (records attached)
 - ___ **Other assessments as outlined in 704 KAR 3:286 Section 3; 11(b) & 12(a)**

Creativity

- Evidence (A minimum of *three* criteria must be checked.)**
- ___ Standardized Creativity Tests
 - Test: _____ Date: _____
 - ___ Behavior checklist completed by teacher.
 - ___ Behavior checklist completed by parent.
 - ___ Behavior checklist completed by self.
 - ___ Survey/Assessment/Sociogram
 - ___ **Teacher** ___ **Parent** ___ **Self** ___ **Peer**
 - ___ Samples of student work (attached)
 - ___ Anecdotal record, observation of original ideas, products, or problem solving. (**documentation attached**)
 - ___ **Individual Awards Specify:** _____
 - ___ Evidence of formal identification in another KY district/another state
 - District:** _____ **State:** _____ (records attached)
 - ___ Other assessments as outlined in 704 KAR 3:285 Section 3; 11(b) & 12(a)
 - Specify** _____