Gifted & Talented Program Handbook

Campbell County Schools
Gifted & Talented Coordinator: Dr. Shelli Wilson, Associate Superintendent
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<td>Specific Academic Aptitude Parent Nomination Letter</td>
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<td>53</td>
<td>Language/Reading Parent Checklist</td>
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<td>54</td>
<td>Math Parent Checklist</td>
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</table>
Visual and Performing Arts

Music Jot Down

Drama Jot Down

Dance Jot Down

Visual Arts Teacher Nomination Form

Music Teacher Nomination Form

Drama Teacher Nomination Form

Dance Teacher Nomination Form

Visual and Performing Arts Anecdotal Notes

Visual and Performing Arts Parent Nomination Letter

Visual Arts Parent Checklist

Music Parent Checklist

Drama Parent Checklist

Dance Parent Checklist

Visual and Performing Arts Talent Search

Visual and Performing Arts Parent Identification Letter

Visual and Performing Arts Identification Committee Form

Primary Talent Pool

Primary Talent Pool Overview

Primary Talent Pool Jot Down

Primary Talent Pool Teacher Nomination Form

Primary Talent Pool Anecdotal Notes

Primary Talent Pool Parent Nomination Letter

Primary Talent Pool Parent Checklist

Primary Talent Pool Parent Identification Letter

Primary Talent Pool Identification Committee Form

Appendix

Parent Letter – More Documentation Needed for Identification

Gifted Student Service Plan (GSSP)

Gifted & Talented Progress Report

Parent Letter – Duke TIP
Campbell County Schools
Gifted and Talented Identification Process

1. After a screening tool is administered, students meeting specific criteria will be recommended for gifted and talented identification. (See screening timeline and overviews for each area of identification for specifics.)

2. In order for formal identification to occur, there must be at least three pieces of evidence including the screening tool.
   - The staff developer will give the classroom teacher a teacher checklist and anecdotal records sheet to complete.
   - The staff developer will send a letter to the student’s parents/guardians notifying them of the recommendation along with a parent checklist to complete.
   - The staff developer will determine if more evidence is needed and will collect it if necessary. (e.g., student work samples, recommendations, other screening tools)

3. The school’s Gifted and Talented Identification committee will meet to review the evidence. The committee shall consist of the following members:
   - Staff Developer
   - Principal or Principal’s Designee (e.g., counselor or assistant principal)
   - Recommended Student’s Classroom Teacher
   - Teacher with Gifted and Talented Certification (if available at the school)
   - Any other members deemed necessary by the committee (e.g., art teacher for an art recommendation)

4. If the committee determines that the recommended student should be identified as Gifted and Talented, the following steps shall occur:
   - The committee will discuss and complete a Gifted Student Service Plan (GSSP). **The GSSP will be completed as a component of the students’ ILP from fifth grade through high school.
   - The staff developer will send a letter to the student’s parents/guardians notifying them of the identification along with a copy of the GSSP that they must sign and return to school. (Once the GSSP is returned to school, the staff developer will make a copy and send it to the parents/guardians.)
   - The GSSP immediately goes into effect upon return.
   - The staff developer will enter the identification and GSSP information into Infinite Campus. (See Infinite Campus Directions for details.)
   - The staff developer will create a Gifted and Talented folder for each identified student. (See GT Folder Directions for details.)
   - The staff developer will work with the classroom teacher to ensure that the GSSP is being implemented effectively.
• Gifted and Talented progress reports will be sent home once each semester (December and May).
• Once a student is identified as Gifted and Talented in a certain area, he or she will receive services until he or she graduates from Campbell County High School or transfers out of the district. (If a student transfers out of the district, his or her Gifted and Talented folder shall be sent along with the cumulative records.)

5. If the committee determines that more evidence is needed before a decision regarding identification can be made, the following steps shall occur:
   • The staff developer will send a letter to the student’s parents/guardians notifying them that more documentation is needed and the referral will be reviewed after the next round of MAP testing (for identification in specific academic areas) or the following school year (for other areas).
   • The evidence will be kept in a folder and reviewed by the committee after the next round of MAP testing (for identification in specific academic areas) or the following school year (for other areas).
   • If the student is moving on to the middle or high school the following year, the staff developer will send the evidence to the next building’s staff developer with instructions to revisit the recommendation.

6. Students identified as Gifted and Talented will receive a new Gifted Student Service Plan each year. The staff developer will complete the GSSP with the student’s current teacher(s), send a copy to be signed by the parents/guardians, and enter the services in Infinite Campus.
# Campbell County Schools
## Gifted and Talented Screening Timeline

<table>
<thead>
<tr>
<th>Month</th>
<th>Activities and Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>August</td>
<td>Check CogAT results for possible recommendations in the area of general intellect.</td>
</tr>
<tr>
<td>September</td>
<td>MAP Testing – check for possible recommendations in math, language arts, science, and Primary Talent Pool</td>
</tr>
</tbody>
</table>
| October | Creativity Jot Down  
Social studies IOWA screener for recommended students |
| November | Leadership Jot Down  
Talent Pool Jot Down |
| December | ***Send progress reports home with identified students (4th – 12th grades) |
| January | MAP Testing – check for possible recommendations in math, language arts, science, and Primary Talent Pool |
| February | Visual and Performing Arts Jot Downs  
(art, music, drama, and dance)  
***Followed by auditions for those who are recommended. |
| March | CogAT (General Intellect Screener) – 3rd & 6th graders  
***By the end of March, all identified students’ data must be entered into Infinite Campus. |
| April | MAP Testing – check for possible recommendations in math, language arts, science, and Primary Talent Pool |
| May | ***Send progress reports home with identified students (4th – 12th grades) |
| June | ***Enter an end date (last day of school) for third grade Primary Talent Pool students. |
Campbell County Schools
Gifted and Talented Folder Directions

A folder of documentation will be kept in the cumulative folder for every student identified as Gifted and Talented. The directions for maintaining the folders are as follows:

1. Students selected for the Primary Talent Pool will have a YELLOW folder.

2. Students identified as Gifted and Talented will have a PURPLE folder.

3. The student’s name will be written on the folder (Last, First).

4. Area(s) of identification will be marked visibly on the front of the folder with the school year that the student was identified.

5. The folder contents will include:
   - Identification Cover Sheet (n/a for Primary Talent Pool)
   - Identification Documentation (at least 3 pieces of evidence) – ORIGINALS
   - Gifted Student Service Plans (n/a for Primary Talent Pool)
   - Progress Reports (n/a for Primary Talent Pool)

6. Primary Talent Pool folders will be removed from the students’ cumulative folders at the end of third grade. (Staff developers will keep the Primary Talent Pool folders on file until the student enters middle school.)
Infinite Campus Directions

It is very important that the student information in Infinite Campus be kept up-to-date and accurate. The steps for entering Gifted and Talented information is as follows:

1. Log-on to Infinite Campus.
2. Search for the student.
3. Click on the “Gifted & Talented” tab.
4. To add a new identification area, click on “Add Gifted & Talented.”
5. Use the dropdown box under “Gifted Category” to choose the identified area.
6. Enter the “Year Identified” and the “Start Date.” (For example, if a student is identified on 2/10/2013, the “start date” should be 2/10/2013, and the year identified should be 2013.)
7. In grades 4-12, an “End Date” is NOT marked until the student graduates from high school or transfers out of the public school system.
8. For Primary Talent Pool students, the “End Date” is marked as the last day of third grade after the student has completed the third grade.
9. At least two service delivery options must be marked and should match the options marked on the Gifted Student Service Plan.
10. At least three pieces of evidence must be marked. (For identification in a specific academic area or in general intellectual ability, one piece of evidence must be that the student scored within the ninth stanine on a norm-referenced achievement test, such as MAP or the CogAT.)
11. Choose “Save” at the top of the page.
12. The service options should be revisited each year to match the student’s annual Gifted Student Services Plan. (The start date and evidence will remain the same form the original identification.)

***Detailed instructions can be found at: http://www.kde.state.ky.us/NR/rdonlyres/D9570090-A4CE-42C3-8914-C48685619A14/0/20122013GiftedandTalentedDataStandards.pdf
Creative/ Divergent Thinking
Creative/Divergent Thinking
(4th – 12th)

Definition (as defined is 704 KAR 3:285 – Gifted and Talented Services):
Possessing either demonstrated or potential ability to perform at an exceptionally high level in creative thinking and divergent approaches to conventional tasks as evidenced by innovative or creative reasoning, advanced insight and imagination, and solving problems in unique ways.

Screening Tool: Creativity Jot Down
Classroom teachers will complete the Creative Thinking Jot Down tool in October.

Identification:
Students listed in 14 out of the 16 boxes on the Jot Down are considered for identification in the area of Creativity/Divergent Thinking. At least two other pieces of evidence must be considered by the identification committee before a student receives services.

Other Evidence May Include:
- Teacher Nomination/Checklist
- Anecdotal Notes
- Parent Checklist
- The Williams Scale (Parent & Teacher Rating Scale)
- Peer Identification Sheet
- Student Work Samples
- Creative Writing Samples/ Awards/ Published Works
- Observations Targeting Creative Behavior / Problem Solving
### Campbell County Schools: Creative/Divergent Thinking Jot Down

**Teacher Name:** ____________________  **Date:** ____________

<table>
<thead>
<tr>
<th>Fluency – many ideas.</th>
<th>Flexibility – able to change ideas</th>
<th>Elaboration – able to add to ideas</th>
<th>Originality – has ideas no one else may have thought of</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alert and curious, constantly asking questions about everything and anything</td>
<td>May be bored with routine tasks</td>
<td>Imaginative – has a strong sense of fantasy</td>
<td>May daydream at times</td>
</tr>
<tr>
<td>May be uninhibited in expressions or opinions, is sometimes radical/tenacious</td>
<td>High risk taker, adventurous, speculative</td>
<td>High energy level which may at times cause student to get in trouble</td>
<td>Sense of humor – sees humor in situations others do not see</td>
</tr>
<tr>
<td>Has low interest for providing details</td>
<td>May not read rules or may question the rules</td>
<td>Enjoys spontaneous activities</td>
<td>Appears reflective or idealistic</td>
</tr>
</tbody>
</table>
Campbell County Schools Gifted & Talented Nomination Forms

Student Name: _____________________________  Teacher Name: ______________________
School: ___________________________  Grade: __________  Date: _______________

CREATIVE/DIVERGENT THINKING

A. Indications (check all that apply):
   ☐ Creativity Jot-Down (at least 14 out of 16 areas marked)
   ☐ Expression of creative ideas – creative thinking activity products, creative writing, production of ideas, inventions (picture or narrative attached)
   ☐ Other (e.g., Williams Scale Scores):________________________________

B. Anecdotal: Please use attachment to comment on student’s:
   ☐ Level of performance
   ☐ Special strength and weaknesses
   ☐ Needs caused by giftedness

C. Additional information that you believe is relevant. (Attachment)

D. Creativity Checklist (Below)

(MUST BE COMPLETED FOR RECOMMENDED STUDENTS)

Please check the characteristics which accurately describe the TYPICAL behavior of this student.

☐ Fluency- many ideas
☐ Flexibility- able to change ideas
☐ Elaboration- able to add to their ideas
☐ Originality- has ideas no one else may have thought of
☐ Alert and curious, constantly asking questions about everything and anything
☐ May be bored with routine tasks
☐ Imaginative- has a strong sense of fantasy, vivid imagination
☐ May daydream at times
☐ May be uninhibited in expressions or opinions, is sometimes radical/tenacious
☐ High risk taker, adventurous, speculative
☐ High energy level which may at times cause student to get in trouble
☐ Sense of humor - sees humor in situations others do not see
☐ Has low interest for providing details
☐ May not read rules/instructions or may question the rules
☐ Enjoys spontaneous activities
☐ Appears reflective or idealistic
Campbell County Schools Gifted and Talented Nomination Forms

Student Name: ______________________ Teacher Name: ______________________
School: ___________________________ Grade: _____ Date: ______________

Anecdotal Notes
Gifted/Talented Area: Creative/Divergent Thinking

Please comment on the following:
Level of performance:

Special strengths and weaknesses:

Needs caused by giftedness:

Ability to work independently and focus responsibility on specific area:
Date: ______________________

To the parent(s)/guardian(s) of _________________________________,

We are pleased to inform you that your child, _________________________________, has been referred as a possible candidate for the Gifted & Talented education program in the area of Creative/Divergent Thinking. Creative or divergent thinking ability (as defined in 704 KAR 3:285 – Gifted & Talented Services) means: Possessing either demonstrated or potential ability to perform at an exceptional high level in creative thinking and divergent approaches to conventional tasks as evidenced by innovative or creative reasoning, advanced insight and imagination, and solving problems in unique ways.

According to Kentucky regulations, at least three pieces of informal or formal measures are required in order to identify a student for Gifted & Talented services. In addition to a teacher checklist of indicators, other measures may include creative writing samples/awards/published works, observations targeting creative behavior or problem-solving and anecdotal records. As a partner with us in your child’s education, your input is valuable. Please complete the attached checklist and return it to school by ____________________________.

A committee will be reviewing the evidence, and you will be notified as to whether or not your child has been identified as Gifted & Talented. Please do not hesitate to contact me via phone or email if you have any questions or concerns. Thank you for working together with us to provide your child with the best education possible!

Thank you,

Campbell County Schools
Gifted & Talented Handbook
Developed 2012 by Amity Kukla
Campbell County Schools Gifted and Talented Parent Checklist

Student Name: ______________________________  Teacher Name: ______________________________
School: __________________________________  Grade: ___________  Date: ______________
Name of parent/guardian completing checklist: ______________________________
Signature: ______________________________________

CREATIVE/DIVERGENT THINKING

Please check the characteristics that accurately describe your child’s typical behaviors.

- □ Fluency – thinks of many ideas
- □ Flexibility – able to change ideas
- □ Elaboration – able to add to their ideas
- □ Originality – has ideas no one else may have thought of
- □ Alert and curious, constantly asking questions about everything and anything
- □ May be bored with routine tasks
- □ Imaginative – has a strong sense of fantasy, vivid imagination
- □ May daydream at times
- □ May be opinionated
- □ High risk taker, adventurous, speculative
- □ Likes things that are difficult or complicated
- □ High energy level which may at times cause student to get in trouble
- □ Sense of humor – sees humor in situations others do not see
- □ Has low interest for providing details
- □ May not read rules/instructions or may question the rules
- □ Enjoys spontaneous activities
- □ Appears reflective or idealistic

Additional Comments:
The Williams Scale
A Parent and Teacher Rating Scale of Children’s
Divergent Thinking and Feeling Related to Creativity

Child’s Name: ____________________________ Date: ___________ Grade: ______

School: ________________________________ Age: ______ years ______ months

Person Completing the Scale: _______________ Relationship to Child: ________________

How long have you known the child? _____________________________________________

**Directions for Using the Scale:** Check the appropriate box beside each item which best describes the child’s behavior.

<table>
<thead>
<tr>
<th>Fluency</th>
<th>Often</th>
<th>Sometimes</th>
<th>Seldom</th>
</tr>
</thead>
<tbody>
<tr>
<td>The child thinks of several answers when a question is asked.</td>
<td></td>
<td></td>
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<tr>
<td>The child draws several pictures when asked to draw one.</td>
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<tr>
<td>The child has several ideas about something instead of just one.</td>
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<tr>
<td>The child asks many questions.</td>
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<tr>
<td>The child uses a large number of words when expressing ideas.</td>
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<tr>
<td>The child works rapidly and produces a great deal.</td>
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<table>
<thead>
<tr>
<th>Flexibility</th>
<th>Often</th>
<th>Sometimes</th>
<th>Seldom</th>
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</thead>
<tbody>
<tr>
<td>The child thinks of many ways to use an object rather than its common use.</td>
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<td></td>
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<tr>
<td>The child expresses more than one meaning for a picture, story, poem, or problem.</td>
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<tr>
<td>The child can transfer meaning in one subject to another subject.</td>
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<tr>
<td>The child shifts his point of view to another point of view.</td>
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<tr>
<td>The child exhibits a variety of ideas and explores many of them.</td>
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<tr>
<td>The child thinks of numerous possibilities for solving a problem.</td>
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<td></td>
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<tr>
<td>Imagination</td>
<td>Often</td>
<td>Sometimes</td>
<td>Seldom</td>
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<tr>
<td>The child makes up stories about places never seen.</td>
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<tr>
<td>The child imagines how others would deal with a problem.</td>
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<tr>
<td>The child daydreams about things or places.</td>
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<tr>
<td>The child likes to imagine things he has never experienced.</td>
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<tr>
<td>The child sees things in pictures or drawings other than the obvious.</td>
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<tr>
<td>The child can wonder freely about things and ideas.</td>
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<table>
<thead>
<tr>
<th>Complexity</th>
<th>Often</th>
<th>Sometimes</th>
<th>Seldom</th>
</tr>
</thead>
<tbody>
<tr>
<td>The child is interested in intricate things and ideas.</td>
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<tr>
<td>The child likes to involve himself in complicated tasks.</td>
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<tr>
<td>The child wants to figure things out without assistance.</td>
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<tr>
<td>The child enjoys tasks that are difficult.</td>
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<tr>
<td>The child thrives on trying again and again in order to succeed.</td>
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<tr>
<td>The child produces more complex solutions to problems than seem necessary.</td>
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<table>
<thead>
<tr>
<th>Risk-Taking</th>
<th>Often</th>
<th>Sometimes</th>
<th>Seldom</th>
</tr>
</thead>
<tbody>
<tr>
<td>The child will defend ideas regardless of the reactions of others.</td>
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<tr>
<td>The child sets high goals of accomplishment and is not afraid to try to achieve them.</td>
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<tr>
<td>The child admits to mistakes or failures.</td>
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<tr>
<td>The child likes trying new things or ideas and is not easily influenced by friends.</td>
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<tr>
<td>The child is not overly concerned with disapproval by classmates, teachers or parents.</td>
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<tr>
<td>The child prefers taking chances or “dares” just to learn of the outcomes.</td>
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</table>
Peer Identification – Creativity - Elementary

Pretend our class found a puppy on the playground.

Which three students would be most likely to think up lots of names for the puppy?
1. ____________________  2. ____________________  3. ____________________

Which three would make up the most unusual names?
1. ____________________  2. ____________________  3. ____________________

Which three would think of names no one else would think of?
1. ____________________  2. ____________________  3. ____________________

Which three probably would come up with the name we would finally decide on?
1. ____________________  2. ____________________  3. ____________________

Which three students would be the most likely to write a story about the puppy?
1. ____________________  2. ____________________  3. ____________________

Which three students would probably think up different ways to teach the puppy a trick?
1. ____________________  2. ____________________  3. ____________________

If we design a collar for our puppy, which three students would probably come up with the most designs for a collar?
1. ____________________  2. ____________________  3. ____________________

Which three students would come up with the fanciest collar?
1. ____________________  2. ____________________  3. ____________________

Which three students would come up with the most unusual collar?
1. ____________________  2. ____________________  3. ____________________

Which three students would make the most suggestions of what could be done with the puppy?
1. ____________________  2. ____________________  3. ____________________

Which three would give the teacher the most reasons for allowing the dog to come into the classroom?
1. ____________________  2. ____________________  3. ____________________
Date: ____________________________

To the parent(s)/guardian(s) of ______________________________:

As you know, your child was referred as a possible candidate for the Gifted & Talented education program in the area of Creative/Divergent Thinking. Based on the teacher’s recommendation, the parent checklist, and other documentation, the committee has approved the recommendation. I’m sure that you are very proud of your child’s accomplishments!

Once a student is formally identified as Gifted & Talented in an area, he or she remains identified and receives gifted services in that area until he or she graduates from high school. However, a student can be referred for additional areas of identification at any time if there is evidence to support the referral.

Your child’s Gifted/Talented Student Services Plan is attached. Please review it, sign the bottom, and return it to school as soon as possible. I will make a copy of the signed form and send it home for you to keep for your records. Please don’t hesitate to contact me with any questions.

Again, congratulations on your child’s success!

Thank you,
# CAMPBELL COUNTY SCHOOLS
## GIFTED & TALENTED IDENTIFICATION PROCESS

**Student:**  
**School:**  
**Identification Area:** **CREATIVE/DIVERGENT THINKING**

**Date:**  

**Evidence:**

<table>
<thead>
<tr>
<th>Creative or Divergent Thinker Evidence:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Anecdotal observation</td>
<td>Behavioral checklists specific to creative behavior</td>
</tr>
<tr>
<td>Checklist inventories (underachieving or disadvantaged)</td>
<td>Collection of evidence from portfolios</td>
</tr>
<tr>
<td>Continuous progress data</td>
<td>Creative work samples</td>
</tr>
<tr>
<td>Formal assessment measures</td>
<td>Informal assessment measures</td>
</tr>
<tr>
<td>Nominations-Peer</td>
<td>Nominations-Self or petition</td>
</tr>
<tr>
<td>Primary review committee recommendation</td>
<td>Referrals/Recommendations-Parent</td>
</tr>
<tr>
<td>Referrals/Recommendations-Teacher</td>
<td>Student awards or critiques</td>
</tr>
<tr>
<td>Other, specify [ ]</td>
<td></td>
</tr>
</tbody>
</table>

**Notes:**

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

**Signatures:**

_________________________  _________________________  _______________________

_________________________  _________________________  _______________________

---

*Campbell County Schools*  
*Gifted & Talented Handbook*  
*Developed 2012 by Amity Kukla*
General Intellectual Ability
General Intellectual Ability

(4th – 12th)

Definition (as defined is 704 KAR 3:285 – Gifted and Talented Services):
Possessing either demonstrated or potential ability to perform at an exceptionally high level in general intellectual ability and possessing a consistently outstanding mental capacity as compared to children of one’s own age, experience, or environment. General intellectual ability is usually reflected in extraordinary performance in a variety of cognitive areas, such as abstract reasoning, logical reasoning, social awareness, memory, spatial relations, and the analysis, synthesis, and evaluation of information.

Screening Tool: Cognitive Abilities Test (CogAT)
All 3rd and 6th grade students are administered the Cognitive Abilities Test (CogAT). This test measures general thinking and problem-solving skills in three areas that are linked to academic success: Verbal Reasoning, Non-Verbal Reasoning, and Quantitative Reasoning. Questions include skills such as classifying, patterns, and analogies.

Identification:
Students who earn a composite score at the 96th percentile or above on the CogAT are considered for identification in the area of General Intellectual Ability. At least two other pieces of evidence must be considered by the identification committee before a student receives services.

Other Evidence May Include:
- Teacher Nomination/Checklist
- Anecdotal Notes
- Parent Checklist (Silverman/Waters Checklist)
- Student Work Samples
Date: ____________________

Dear 3rd Grade Parent(s)/Guardian(s),

The Campbell County Schools administer the Cognitive Abilities Test (CogAT) to all 3rd graders in order to identify students who may qualify as gifted and talented in the area of general intellect. Students are formally identified as gifted and talented in the 4th grade. One requirement for gifted and talented identification is that a student score in the 96th percentile or above on a norm-referenced test, such as the CogAT.

Your child will be taking the CogAT next week. This test measures general thinking and problem-solving skills in three areas that are linked to academic success: Verbal Reasoning, Non-Verbal Reasoning, and Quantitative Reasoning. Questions include skills such as classifying, patterns, and analogies. It’s not like a spelling or math test where if you know all of the words or facts, you will get a 100%. There is no defined curriculum for the CogAT. It is a timed test, but most students have enough time to attempt every item. The test will be given in three parts over a period of two days, and each part takes approximately 40 minutes to administer.

Your child’s CogAT scores do not count on his or her permanent record and are not part of Kentucky’s state testing. You will receive a copy of your child’s scores during the fall of next school year. Please do not hesitate to call or email if you have any questions. We are confident that our students will do their best and shine as always!

Thank you,
Campbell County Schools Gifted & Talented Nomination Forms

Student Name: ___________________________  Teacher Name: _______________________
School: ___________________________  Grade: ________  Date: ______________

General Intellectual Ability

A. Indications (check all that apply):

☐ National normed mental ability scores – Cognitive Abilities Test (Cog-AT)
  Cog-AT: Date: __________  Composite Score: __________%ile

☐ Other national normed tests:
  Test name: __________  Date: __________  Score: __________%ile

B. Anecdotal: Please use attachment to comment on student’s:

☐ Level of performance
☐ Special strength and weaknesses
☐ Needs caused by giftedness
☐ Ability to work independently and focus responsibly

C. Student’s work that substantiates giftedness in general intellectual ability. (Attachment)

D. Additional information that you believe is relevant. (Attachment)

E. General Intellectual Ability Checklist (Below)

(MUST BE COMPLETED FOR RECOMMENDED STUDENTS)

Please check the characteristics which accurately describe the TYPICAL behavior of this student.

☐ Sees connections/recognizes patterns, may want to know how what is being taught “fits in”.
☐ Asks many probing questions, sometimes to the point of driving others “up the wall”.
☐ Appears to have a deep sense of justice. May correct others seen as wrong.
☐ Able to work one or two years above others in age group.
☐ Widely read or likes to read. May prefer to read rather than be with others.
☐ Seems to know many things that have not been taught.
☐ Has a large vocabulary but may choose when to display it.
☐ Benefits from rapid rate of presentation. May refuse to do work seen as “busy work”.
☐ Displays intensity for learning. Preoccupied and hard to move on to new area.
☐ Prefers a few close friends to many friends.
☐ Likes to observe before trying new activities. Think through ideas before sharing with others.
☐ Knowledgeable about things age peers may not be aware of.
☐ Prefers to work independently with little direction. May be resistant to being a leader of a group.
☐ Displays abstract thinking. Requires time to think before responding.
☐ High energy level- physical, intellectual, and psychological.
☐ May have discrepancies between physical, social, and intellectual development.
Campbell County Schools Gifted and Talented Nomination Forms

Student Name: ______________________ Teacher Name: ______________________
School: ____________________________ Grade: _____ Date: ______________

Anecdotal Notes
Gifted/Talented Area: General Intellectual Ability

Please comment on the following:
Level of performance:

Special strengths and weaknesses:

Needs caused by giftedness:

Ability to work independently and focus responsibility on specific area:
Date: ________________________

To the parent(s)/guardian(s) of _________________________________,

We are pleased to inform you that your child, _________________________________, has been referred as a possible candidate for the Gifted & Talented education program in the area of General Intellectual Ability. General Intellectual Ability (as defined in 704 KAR 3:285 – Gifted & Talented Services) means: Possessing either demonstrated or potential ability to perform at an exceptionally high level in general intellectual ability and possessing a consistently outstanding mental capacity as compared to children of one’s own age, experiences, or environment. General intellectual ability is usually reflected in extraordinary performance in a variety of cognitive areas, such as abstract reasoning, logical reasoning, social awareness, memory, spatial relations, and the analysis, synthesis, and evaluation of information.

According to Kentucky regulations, at least three pieces of evidence are required in order to identify a student for Gifted & Talented services. During the second semester of third grade, all students are administered the Cognitive Abilities Test (CogAT). Your child has been referred to the program due to earning a score in the 96th percentile or above on the CogAT. Along with your child’s test score, his/her classroom teacher will be completing a checklist and anecdotal notes. As a partner with us in your child’s education, your input is valuable. Please complete the attached checklist and return it to school by ____________________________.

A committee will be reviewing the evidence, and you will be notified as to whether or not your child has been identified as Gifted & Talented. Please do not hesitate to contact me via phone or email if you have any questions or concerns. Thank you for working together with us to provide your child with the best education possible!

Thank you,
Student’s Name: ___________________________ Grade: _____ Date: ________________

Parent/Guardian’s Name: ___________________________________________________

Silverman/Waters Checklist

Compared to other children your child’s age, please check each of the descriptors below which fit your child well:

☐ Good problem-solving abilities
☐ Rapid learning ability
☐ Extensive vocabulary
☐ Good memory
☐ Long attention span
☐ Sensitivity
☐ Compassion for others
☐ Perfectionism
☐ High degree of energy
☐ Preference for older companions
☐ Wide range of interests
☐ Excellent sense of humor
☐ Early or avid reading ability
☐ Good ability with puzzles, mazes, or numbers
☐ At times, mature for age
☐ Perseverance in areas of interest

Please return this form to your child’s classroom/homeroom teacher by the end of the week.
To the parent(s)/guardian(s) of ______________________________:

As you know, your child was referred as a possible candidate for the Gifted & Talented education program in the area of **General Intellectual Ability**. Based on your child’s Cognitive Abilities Test (CogAT) scores, the teacher’s recommendation, the parent checklist, and other documentation, the recommendation has been approved. I’m sure that you are very proud of your child’s accomplishments! You will receive your child’s Gifted/Talented Student Services Plan soon.

Once a student is formally identified as Gifted & Talented in an area, he or she remains identified and receives gifted services in that area until he or she graduates from high school. However, a student can be referred for additional areas of identification at any time if there is evidence to support the referral.

Your child’s Gifted/Talented Student Services Plan is attached. Please review it, sign the bottom, and return it to school as soon as possible. I will make a copy of the signed form and send it home for you to keep for your records. Please don’t hesitate to contact me with any questions.

Again, congratulations on your child’s success!

Thank you,
CAMPBELL COUNTY SCHOOLS
GIFTED & TALENTED IDENTIFICATION PROCESS

Student: ____________________ School: ____________________

Identification Area: General Intellectual Ability Date: ______________

Evidence:

General Intellectual Ability Evidence:

- Anecdotal records
- Checklist inventories (underachieving or disadvantaged)
- Continuous progress data
- Informal assessment
- Nominations-Self or petition
- Primary review committee recommendation
- Referrals/Recommendation-Teacher
- 9th stanine on comp. test of intellectual ability

Behavioral checklist inventories
Collection of evidence from portfolios
High performance on intellectual assessment
Nominations-Peer
Observation of applied advanced reasoning ability
Referrals/Recommendation-Parent
Student awards or critiques
Other, Specify

Intellectual Ability Test

Notes:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Signatures:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
Leadership
Leadership Ability
(4th – 12th)

Definition (as defined is 704 KAR 3:285 – Gifted and Talented Services):
Possessing either demonstrated or potential ability to perform at an exceptionally high
level in social skills and interpersonal qualities such as poise, effective oral and written
expression, managerial ability, and the ability, or vision, to set goals and organize others
to successfully reach those goals.

Screening Tool: Leadership Jot Down
Classroom teachers will complete the Leadership Jot Down tool in November.

Identification:
Students listed in 14 out of the 16 boxes on the Jot Down are considered for
identification in the area of Leadership Ability. At least two other pieces of evidence
must be considered by the identification committee before a student receives services.

Other Evidence May Include:
- Teacher Nomination/Checklist
- Anecdotal Notes
- Parent Checklist
- Recommendation Form
- Peer Identification Sheet
- Renzulli’s Leadership Qualities Checklist
- Roets’ Self-Rating Scale
<table>
<thead>
<tr>
<th>Gets others to work toward desirable/undesirable goals</th>
<th>Looked to by others when something must be decided</th>
<th>Initiates activities that involve peers</th>
<th>Able to figure out what is wrong with an activity and show others how to do it better</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transmits his/her enthusiasm for a task to others</td>
<td>Judges abilities of others and finds a place for them</td>
<td>May appear “bossy” at times</td>
<td>Interacts easily with both children and adults</td>
</tr>
<tr>
<td>Sought out by other students for play/activities</td>
<td>Sense of justice and fair play</td>
<td>Can be counted on to do what he/she promised</td>
<td>Self-confident</td>
</tr>
<tr>
<td>Is often the captain of teams</td>
<td>Helps settle differences</td>
<td>Makes things happen</td>
<td>May be frustrated by lack of organization or progress</td>
</tr>
</tbody>
</table>
Campbell County Schools Gifted & Talented Nomination Forms

Student Name: _____________________________ Teacher Name: ______________________
School: _____________________________ Grade: _______ Date: _______________

LEADERSHIP

A. Indications (check all that apply):
☐ Leadership Jot-Down (at least 14 out of 16 areas marked)
☐ Elected to office (in or out of school)
  Office: ____________________________ Organization: ____________________________
  Office: ____________________________ Organization: ____________________________
☐ Entrepreneur; type of business
☐ Responsibilities (assumed or assigned)
☐ Other: __________________________________________________________________

B. Anecdotal: Please complete attachment.
C. Additional information that you believe is relevant. (Attachment)
D. Leadership Checklist (Below)

(MUST BE COMPLETED FOR RECOMMENDED STUDENTS)

Please check the characteristics which accurately describe the TYPICAL behavior of this student.
☐ Influences others to work toward desirable/undesirable goals
☐ Looked to by others when something must be decided
☐ Tends to dominate peers or situations
☐ Initiates activities that involve peers
☐ Transmits his/her enthusiasm for a task to others
☐ Judges abilities of others and finds a place for them
☐ May appear “bossy” at times
☐ Interacts easily with both children and adults
☐ Sought out by other students for play/activities
☐ Sense of justice and fair play
☐ Can be counted on to do what he/she promised
☐ Self-confident
☐ Is often the captain of teams
☐ Is sensitive to feelings of others or to situations
☐ Makes things happen
☐ May be frustrated by lack of organization or progress
Campbell County Schools Gifted and Talented Nomination Forms

Student Name: ______________________ Teacher Name: __________________
School: __________________________ Grade: _____ Date: ______________

Anecdotal Notes
Gifted/Talented Area: Leadership

Please comment on the following:
Level of performance:

Special strengths and weaknesses:

Needs caused by giftedness:

Ability to work independently and focus responsibility on specific area:
Date: ______________________

To the parent(s)/guardian(s) of ________________________________,

We are pleased to inform you that your child, ________________________________, has been referred as a possible candidate for the Gifted & Talented education program in the area of Leadership. Leadership ability (as defined in 704 KAR 3:285 – Gifted & Talented Services) means: Possessing either demonstrated or potential ability to perform at an exceptionally high level in social skills and interpersonal qualities such as poise, effective oral and written expression, managerial ability, and the ability, or vision, to set goals and organize others to successfully reach those goals.

According to Kentucky regulations, at least three pieces of informal measures are required in order to identify a student for Gifted & Talented services in the area of leadership. As a partner with us in your child’s education, your input is valuable. Please complete the attached checklist and return it to school by ________________________________.

A committee will be reviewing the evidence, and you will be notified as to whether or not your child has been identified as Gifted & Talented. Please do not hesitate to contact me via phone or email if you have any questions or concerns. Thank you for working together with us to provide your child with the best education possible!

Thank you,
Campbell County Schools Gifted & Talented Parent Checklist

Student Name: _____________________________  Teacher Name: __________________________
School: __________________________________  Grade: __________  Date: _______________
Signature of Parent/Guardian Completing Checklist: ______________________________________

LEADERSHIP

A. Indications (check all that apply):
   ☐ Active in youth groups (in or out of school)
     Organization _____________________________________________________________
     Responsibilities (assumed or assigned) ______________________________________
   ☐ Other leadership roles
     Explain ________________________________________________________________

B. Leadership checklist

Please see the characteristics which accurately describe the TYPICAL behavior of this student.

☐ Ability to set goals
☐ Influences others to work toward desirable/undesirable goals
☐ Looked to by others when something must be decided
☐ Initiates activities that involve peers
☐ Tends to dominate peers or situations
☐ Judges abilities of others and finds a place for them
☐ May appear “bossy” at times
☐ Interacts easily with both children and adults
☐ Sought out by other students for play/activities
☐ Sense of justice and fair play
☐ Can be counted on to do what he/she promised
☐ Self-confident
☐ Is often the captain of teams
☐ Is sensitive to feelings of others or to situations
☐ Makes things happen
☐ May be frustrated by lack of organization or progress
☐ Motivate others
☐ Expresses negative feelings appropriately

C. Additional comments (use back)
Recommendation Form for Gifted/Talented Services in Leadership Ability

Nominee’s Name: _____________________________  Grade:____  Age:____

School: ______________________________________

Name of Person Making Recommendation: ______________________________________

List school/community group activities nominee is or has been involved in (includes volunteer work, clubs, church activities, etc.):
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Offices held and awards earned in these activities:
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Read the following statements carefully and circle the appropriate number according to the following scale:

1  Seldom or never demonstrates the behavior
2  Occasionally demonstrates the behavior
3  Demonstrates the behavior inconsistently
4  Demonstrates the behavior most of the time
5  Demonstrates the behavior consistently

1  2  3  4  5  Facilitates friendly and positive relations within a group.
Comments:

1  2  3  4  5  Is chosen or elected to leadership positions by peers.
Comments:
1  2  3  4  5  Naturally assumes leadership roles in school and in the community.
Comments:

TEACHER NARRATIVE: (recommendation)

RECOMMENDATION:
Without reservation  ______
With reservation  ______
Questionable  ______
Do not recommend  ______
Peer Identification – Leadership

Students: Please use first and last names. Write one name only (from your class) for each line. You may use the same person’s name for more than one question.

A. If you teacher became ill and had to leave the room, which one of your classmates would take charge and the afternoon would run smoothly?

____________________________________

B. If you had to plan a party, but you did not have time to plan it, which one of your classmates would you ask to plan the party and you know that the party would be a success?

____________________________________

C. A group of students in your class think a rule is unfair. Which of your classmates would you nominate to go talk to the principal about this?

____________________________________
### Renzulli’s Leadership Qualities

<table>
<thead>
<tr>
<th></th>
<th>Seldom/Never</th>
<th>Occasionally</th>
<th>Considerably</th>
<th>Almost Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Carries responsibilities well; can be counted on to do what he has promised and usually does it well.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>2. Is self-confident with children his own age as well as adults; seems comfortable when asked to show his work to the class.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>3. Seems to be well liked by his classmates.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>4. Is cooperative with teacher and classmates; tends to avoid bickering and is generally easy to get along with.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>5. Can express himself well; has good verbal facility and is usually well understood.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>6. Adapts easily to new situations; is flexible in thought and action and does not seem disturbed when the normal routine is changed.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>7. Seems to enjoy being around other people; is sociable and prefers not to be alone.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>8. Tends to dominate others when they are around; generally directs the activity in which he is involved.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>9. Participates in most social activities connected with the school; can be counted on to be there if anyone is.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>10. Excels in athletic activities; is well coordinated and enjoys all sorts of athletic games.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

\[
\text{Add column total} = \begin{array}{c}
\hline
\text{Seldom/}
\text{Never} \\
\text{Occasionally} \\
\text{Considerably} \\
\text{Almost}
\text{Always} \\
\hline
\end{array}
\]

\[
\text{Multiply by weight} = \begin{array}{c}
1 \\
2 \\
3 \\
4
\end{array}
\]

\[
\text{Add weighted column totals} = \begin{array}{c}
\hline
\text{Seldom/}
\text{Never} \\
\text{Occasionally} \\
\text{Considerably} \\
\text{Almost}
\text{Always} \\
\hline
\end{array}
\]
RATING SCALE FOR LEADERSHIP

A Self-rating Scale by Dr. Lois Roets

Name_______________________  Age_____  Grade_____  Date ______________

DIRECTIONS: Read each statement. Mark with the number of your choice.
1—almost always  2—quite often  3—sometimes  4—not very often  5—never

_____ I have strong convictions about things.
_____ When I believe in something, I work to promote it.
_____ I listen to both sides of the issue before I make up my mind.
_____ I have self-confidence.
_____ I am able to say my opinions in public.
_____ I usually am satisfied with the decisions I make.
_____ When I am criticized for some action I have taken, I can usually go about my work.
_____ I like to be in charge of events.
_____ I am able to see what materials are needed to complete a project.
_____ I am able to see the sequence of steps necessary to complete a project.
_____ When I am convinced of something, I have courage to act for it.
_____ I often lead in projects.
_____ When I see somebody who is a leader, I think that I could do as well as that leader.
_____ I can speak to persons in authority.
_____ I have energy to complete projects that I am interested in completing.
_____ I can understand the viewpoints of others.
_____ I am willing to change my mind if new facts suggest that I should change my mind.
_____ I get anxious and excited and am able to use this energy to complete a task.
_____ I am able to work with many types of persons and personalities.
_____ I usually understand the plot of a story or play or the main point in a conversation.
_____ I am willing to try new experiences when these seem wise.
_____ I know when to lead, to follow, and to get out of the way.
_____ I admire people who have achieved great things.
_____ I dream of the day and time when I am able to lead myself or others to great accomplishment.
_____ I feel at ease asking people for help or information.
_____ I can be a “peacemaker” if I want to be.
Date: __________________________

To the parent(s)/guardian(s) of ______________________________:

As you know, your child was referred as a possible candidate for the Gifted & Talented education program in the area of **Leadership**. Based on the teacher’s recommendation, the parent checklist, and other documentation, the committee has approved the recommendation. I’m sure that you are very proud of your child’s accomplishments!

Once a student is formally identified as Gifted & Talented in an area, he or she remains identified and receives gifted services in that area until he or she graduates from high school. However, a student can be referred for additional areas of identification at any time if there is evidence to support the referral.

Your child’s Gifted/Talented Student Services Plan is attached. Please review it, sign the bottom, and return it to school as soon as possible. I will make a copy of the signed form and send it home for you to keep for your records. Please don’t hesitate to contact me with any questions.

Again, congratulations on your child’s success!

Thank you,
# CAMPBELL COUNTY SCHOOLS
# GIFTED & TALENTED IDENTIFICATION PROCESS

**Student:** ___________________  **School:** ___________________

**Identification Area:** **PSYCHOSOCIAL/LEADERSHIP SKILLS**  **Date:** _________________

**Evidence:**

<table>
<thead>
<tr>
<th>Psychosocial &amp; Leadership Skills Evidence:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Behavioral observations</td>
<td>Checklist inventories</td>
</tr>
<tr>
<td>Checklist inventories (underachieving or disadvantaged)</td>
<td>Collection of evidence from portfolios</td>
</tr>
<tr>
<td>Continuous progress data</td>
<td>Documentation of student leadership in class</td>
</tr>
<tr>
<td>Documentation of student leadership in community</td>
<td>Documentation of student leadership in student organization</td>
</tr>
<tr>
<td>Formal testing *</td>
<td>Informal testing</td>
</tr>
<tr>
<td>Other, Specify:</td>
<td></td>
</tr>
</tbody>
</table>

| | |
| Nominations-Peer | Nominations-Self or Petition |
| Primary review committee | Referrals/Recommendations-Parent |
| Referrals/Recommendations-Teacher | Sociograms |
| Student awards or critiques | Other, Specify |

**Notes:**

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

**Signatures:**

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
Specific Academic Aptitude
Specific Academic Aptitude  
(4\textsuperscript{th} – 12\textsuperscript{th})

**Definition** (as defined is 704 KAR 3:285 – Gifted and Talented Services): Possessing either demonstrated or potential ability to perform at an exceptionally high level in specific academic areas significantly beyond the age, experiences, or environment of one’s chronological peers.

**Possible Areas of Identification:**
- Language Arts
- Mathematics
- Science
- Social Studies

**Screening Tools:** Nationally norm-referenced tests such as: Measures of Academic Progress (MAP) Tests (4\textsuperscript{th}-12\textsuperscript{th}), EXPLORE (8\textsuperscript{th}), PLAN (10\textsuperscript{th}), K-PREP Part A of content area tests (3\textsuperscript{rd}-8\textsuperscript{th}), ACT

MAP: Students in grades K-10\textsuperscript{th} are administered the Measures of Academic Progress (MAP) tests three times per year (fall, winter, and spring). At this time, the areas tested include math, reading, language usage, and science.

EXPLORE: Students take the EXPLORE test in the fall of their 8\textsuperscript{th} grade year.

PLAN: Students take the PLAN test in the fall of their 10\textsuperscript{th} grade year.

K-PREP: Students in 3\textsuperscript{rd}-8\textsuperscript{th} grades take the K-PREP state assessment in the spring. Part A of each content area test is norm-referenced and can be used as a screener for Gifted & Talented identification.

ACT: Students can take the ACT at any time.

**Identification:**

**Language Arts**
Students who earn two scores at or above the 96\textsuperscript{th} percentile on the Reading OR Language Usage MAP tests within the last three testing administrations are considered for identification. At least two other pieces of evidence must be considered by the identification committee before a student receives services.

Students who score at or above the 96\textsuperscript{th} percentile on the Reading or Language Arts sections of the EXPLORE, PLAN, K-PREP (Part A), or the ACT AND have at least one score at or above the 96\textsuperscript{th} percentile on the Reading or Language Usage MAP tests will also be considered for identification. At least two other pieces of evidence must be considered by the identification committee before a student receives services.
Mathematics
Students who earn two scores at or above the 96th percentile on the Math MAP test within the last three testing administrations are considered for identification. At least two other pieces of evidence must be considered by the identification committee before a student receives services.

Students who score at or above the 96th percentile on the Math section of the EXPLORE, PLAN, K-PREP (Part A), or the ACT AND have at least one score at or above the 96th percentile on the Math MAP test will also be considered for identification. At least two other pieces of evidence must be considered by the identification committee before a student receives services.

Science
The MAP science test includes two parts: General Science and Concepts and Processes.
Students who earn two averaged scores (average of both parts) at or above the 96th percentile on the MAP test within the last three testing administrations are considered for identification. At least two other pieces of evidence must be considered by the identification committee before a student receives services.

Students who score at or above the 96th percentile on the Science section of the EXPLORE, PLAN, K-PREP (Part A), or the ACT AND have at least one averaged score (average of both parts) at or above the 96th percentile on the Science MAP test will also be considered for identification. At least two other pieces of evidence must be considered by the identification committee before a student receives services.

Social Studies
There is currently no MAP Social Studies test available.

5th Grade: Students who score at or above the 96th percentile on Part A of the K-PREP Social Studies test OR are recommended by a teacher or principal will take the IOWA Social Studies test. Students who score at or above the 96th percentile on the IOWA Social Studies test will be considered for identification. At least two other pieces of evidence must be considered by the identification committee before a student receives services.

8th Grade: Students who score at or above the 96th percentile on the EXPLORE Social Studies section will take the IOWA Social Studies test. Students who score at or above the 96th percentile on the IOWA Social Studies test will be considered for identification. At least two other pieces of evidence must be considered by the identification committee before a student receives services.

Other Evidence May Include:
- Teacher Nomination/Checklist
- Anecdotal Notes
- Parent Checklist
- Student Work Samples
Campbell County Schools Gifted & Talented Nomination Forms

Student Name: ___________________________________________ Teacher Name: __________________________
School: ____________________________________________ Grade: __________ Date: ______________

SPECIFIC ACADEMIC APTITUDE IN LANGUAGE/READING

A. Indications (check all that apply):
   ☐ National normed language/reading Scores
      MAP Date: ___________ Reading Score: ______ %ile  Language Score: ___ %ile
      K-PREP Date: ___________ Reading Score: ______ %ile  Language Score: ___ %ile
   ☐ Other nationally normed tests such as PLAN, EXPLORE, ACT, or others
      Test name: ______________ Date: ___________ Score: ______ %ile

B. Anecdotal: Please use attachment to comment on student’s:
   ☐ Level of performance
   ☐ Special strength and weaknesses
   ☐ Needs caused by giftedness
   ☐ Ability to work independently and focus responsibly on academic tasks related to language/reading

C. Student’s work that substantiates giftedness in language/reading.  (Attachment)

D. Additional information that you believe is relevant. (Attachment)

E. Language Arts Checklist (Below)

(MUST BE COMPLETED FOR RECOMMENDED STUDENTS)

Please check the characteristics which accurately describe the TYPICAL behavior of this student.

☐ Is an avid reader
☐ Has a large, advanced and/or rich vocabulary
☐ Expresses feelings of characters to make them seem real
☐ Writes more than other students (quantity)
☐ Writes for fun
☐ Introduces, develops, and concludes a story interestingly and elaborately
☐ Enjoys composing poems, original stories, plays, or keeping a journal
☐ Exhibits great desire to excel
☐ Is eager to tell others about discoveries and shows excitement in voice when talking about this subject
☐ Prefers to work individually
☐ Is eager to complete tasks
☐ Is very alert: supplies rapid answers
☐ Enjoys talking with experts in this subject
Campbell County Schools Gifted & Talented Nomination Forms
Student Name: _____________________________  Teacher Name: ______________________
School: __________________________________  Grade: __________  Date: _______________

SPECIFIC ACADEMIC APTITUDE IN MATH

A.  Indications (check all that apply):

□ National normed math scores
   MAP Date:_________  Math Score:_________%ile
   K-PREP Date:_________  Math Score:_________%ile
□ Other nationally normed tests such as PLAN, Explore, ACT, or others
   Test name:______________________ Date: ___________ Score:_________%ile

B.  Anecdotal: Please use attachment to comment on student’s:

□ Level of performance
□ Special strength and weaknesses
□ Needs caused by giftedness
□ Ability to work independently and focus responsibly on academic tasks related to math

C.  Student’s work that substantiates giftedness in math. (Attachment)

D.  Additional information that you believe is relevant. (Attachment)

E.  Math Checklist (Below)

(MUST BE COMPLETED FOR RECOMMENDED STUDENTS)

Please check the characteristics which accurately describe the TYPICAL behavior of this student.

□ Gets the answer correct, but may find it difficult to tell you how
□ Events new, obscure systems and codes
□ Reasons effectively, likes logic problems and puzzles
□ Grasps the abstract nature of mathematics easily
□ Enjoys trying to solve difficult problems
□ Likes to solve problems through discovery
□ Intuitive; has the ability to do deductive and inductive reasoning
□ Exhibits great desire to excel in math, as a mathematician or in a math-related field
□ Is eager to tell others about discoveries and shows excitement in voice when talking about this subject
□ Prefers to work individually
□ Is eager to complete tasks
□ Is inquisitive
□ Is very alert: supplies rapid answers in math
□ Enjoys talking with experts in this subject

Campbell County Schools
Gifted & Talented Handbook
Developed 2012 by Amity Kukla
Campbell County Schools Gifted & Talented Nomination Forms

Student Name: _____________________________  Teacher Name: ______________________
School: __________________________________  Grade: __________  Date: _______________

SPECIFIC ACADEMIC APTITUDE IN SCIENCE

A. Indications (check all that apply):
   ☐ National normed science scores
      MAP  Date: __________  General Science Score: ________%ile
            Concepts/Processes Score: ________%ile
      K-PREP  Date: __________  Science Score: ________%ile
      □ Other national normed tests such as PLAN, EXPLORE, ACT, or others:
         Test name: ______________  Date: __________  Score: __________%ile

B. Anecdotal: Please use attachment to comment on student’s:
   ☐ Level of performance
   ☐ Special strength and weaknesses
   ☐ Needs caused by giftedness
   ☐ Ability to work independently and focus responsibly

C. Student’s work that substantiates giftedness in science. (Attachment)

D. Additional information that you believe is relevant. (Attachment)

E. Science Checklist (Below)

(MUST BE COMPLETED FOR RECOMMENDED STUDENTS)

Please check the characteristics which accurately describe the TYPICAL behavior of this student.

☐ Interested in science books and/or science programs on TV
☐ Has science related hobbies or collections
☐ Likes gadgets
☐ Learns science concepts quickly, curious about natural relationships, and wants to understand how things work
☐ Comes up with good questions or ideas for experiments
☐ Persistent; sticks with investigations in spite of difficulties
☐ Exhibits great desire to be a scientist
☐ Is eager to tell others about discoveries and shows excitement in voice when talking about subject
☐ Prefers to work individually
☐ Is inquisitive
☐ Is very alert: supplies rapid answers in science
☐ Enjoys talking with experts in this subject
☐ Enjoys science museums, Discovery channel, etc.
Campbell County Schools Gifted & Talented Nomination Forms

Student Name: ___________________________ Teacher Name: ___________________________
School: ___________________________ Grade: ________ Date: ___________________________

SPECIFIC ACADEMIC APTITUDE IN SOCIAL STUDIES

A. Indications (check all that apply):
   ☐ National normed social studies scores
   K-PREP Date: _________ Social Studies Score: _______%ile
   ITBS Date: _________ Social Studies Score: _______%ile
   ☐ Other national normed tests such as PLAN, EXPLORE, ACT, or others:
   Test name: _________ Date: ___________ Score: _______%ile

B. Anecdotal: Please use attachment to comment on student’s:
   ☐ Level of performance
   ☐ Special strength and weaknesses
   ☐ Needs caused by giftedness
   ☐ Ability to work independently and focus responsibly

C. Student’s work that substantiates giftedness in social studies (Attachment)

D. Additional information that you believe is relevant (Attachment)

E. Social Studies Checklist (Below)

(MUST BE COMPLETED FOR RECOMMENDED STUDENTS)

Please check the characteristics which accurately describe the TYPICAL behavior of this student.

☐ Sensitive to social issues, concerned with moral and ethical questions
☐ Knowledgeable about current events
☐ Reads or watches TV programs dealing with global awareness
☐ Shows interest in learning a foreign language
☐ Has a high interest level in global issues of environment, endangered species, etc.
☐ Enjoys learning about the past, present, and future
☐ Exhibits great desire to earn high grades
☐ Is eager to tell others about discoveries and shows excitement in voice when talking about
   subject
☐ Usually prefers to work individually
☐ Is eager to complete tasks
☐ Is very alert: supplies rapid answers in subject
☐ Is inquisitive
☐ Enjoys talking with experts in this subject
☐ Enjoys Discovery channel
☐ Understands cause and effect
☐ Can apply knowledge to a variety of social science related issues
☐ Interest in people
Campbell County Schools Gifted and Talented Nomination Forms

Student Name: ______________________ Teacher Name: ______________________
School: __________________________ School: __________________________ Grade: _____
Date: ______________ Date: ______________

Anecdotal Notes

Gifted/Talented Area (circle one):   Language Arts
                                   Math
                                   Science
                                   Social Studies

Please comment on the following:
Level of performance:

Special strengths and weaknesses:

Needs caused by giftedness:

Ability to work independently and focus responsibility on specific area:
Date: _______________________

To the parent(s)/guardian(s) of _________________________________,

We are pleased to inform you that your child, _________________________________, has been referred as a possible candidate for the Gifted & Talented education program in the specific academic area(s) of __________________________________________.

Specific Academic Aptitude (as defined in 704 KAR 3:285 – Gifted & Talented Services) means: Possessing either demonstrated or potential ability to perform at an exceptional high level in specific academic areas significantly beyond the age, experiences, or environment of one’s chronological peers.

According to Kentucky regulations, at least three pieces of evidence are required in order to identify a student for Gifted & Talented services. Your child has been referred to the program due to earning two or more scores at the 96th percentile or above in one or more subject areas on a norm-referenced test (e.g., MAP). Along with your child’s test score, his/her classroom teacher will be completing a checklist and anecdotal notes. As a partner with us in your child’s education, your input is valuable. Please complete the attached checklist(s) and return them to school by ____________________________.

A committee will be reviewing the evidence, and you will be notified as to whether or not your child has been identified as Gifted & Talented and in what areas. Please do not hesitate to contact me via phone or email if you have any questions or concerns. Thank you for working together with us to provide your child with the best education possible!

Thank you,
Campbell County Schools Gifted and Talented Parent Checklist

Student Name: ______________________________  Teacher Name: _____________________
School: __________________________________  Grade: ___________  Date: ______________
Name of parent/guardian completing checklist: _______________________________________
Signature: ______________________________________

SPECIFIC ACADEMIC APTITUDE IN LANGUAGE/READING

Please check the characteristics that accurately describe your child’s typical behaviors.

☐ Is an avid reader
☐ Enjoys reading for pleasure and/or information
☐ Has a large, advanced and/or rich vocabulary
☐ Shares books with others
☐ Writes for fun
☐ Writes effectively
☐ Enjoys composing poems, original stories, plays, keeping a journal, or writing information pieces
☐ Shares writing with others
☐ Exhibits great desire to excel
☐ Is eager to tell others about discoveries and shows excitement in voice when talking about this subject
☐ Prefers to work individually
☐ Is eager to complete tasks
☐ Is very alert: supplies rapid answers
☐ Enjoys talking with others

Additional Comments:
Campbell County Schools Gifted and Talented Parent Checklist

Student Name: ______________________________ Teacher Name: ____________________
School: ____________________________ Grade: _________ Date: ___________
Name of parent/guardian completing checklist: _______________________________________
Signature: ______________________________________

SPECIFIC ACADEMIC APTITUDE IN MATH
Please check the characteristics that accurately describe your child’s typical behaviors.

☐ Gets the answer correct, but may find it difficult to tell you how
☐ Reasons effectively, like logic problems and puzzles
☐ Grasps the abstract nature of mathematics easily
☐ Enjoys trying to solve difficult problems
☐ Likes to solve problems through discovery
☐ Intuitive; has the ability to do deductive and inductive reasoning
☐ Exhibits great desire to excel in math, as a mathematician or in a math-related filed
☐ Is eager to tell others about discoveries and shows excitement in voice when talking about this subject
☐ Invents new, obscure systems and codes
☐ Prefers to work individually
☐ Is eager to complete tasks
☐ Asks questions
☐ Is very alert: supplies rapid answers in math
☐ Enjoys talking with experts in this subject

Additional Comments
Campbell County Schools Gifted and Talented Parent Checklist

Student Name: ______________________________  Teacher Name: ________________________
School: __________________________________ Grade: ___________  Date: ________________
Name of parent/guardian completing checklist: _______________________________________
Signature: ______________________________________

SPECIFIC ACADEMIC APTITUDE IN SCIENCE
Please check the characteristics that accurately describe your child’s typical behaviors.

☐ Interested in science books and/or science programs
☐ Has science related hobbies, collections
☐ Likes gadgets
☐ Learns science concepts quickly
☐ Is curious about natural relationship and wants to understand how things work
☐ Comes up with good questions or ideas for experiments
☐ Is persistent; sticks with investigations in spite of difficulties
☐ Exhibits great desire to be a scientist
☐ Is eager to tell others about discoveries and shows excitement in voice when talking about this subject
☐ Enjoys science museums
☐ Prefers to work individually
☐ Is inquisitive, asks questions
☐ Is very alert: supplies rapid answers in science
☐ Enjoys talking with experts in this subject

Additional Comments:
Campbell County Schools Gifted and Talented Parent Checklist

Student Name: ______________________________  Teacher Name: ______________________________
School: __________________________________  Grade: ___________  Date: ______________
Name of parent/guardian completing checklist: _________________________________
Signature: _________________________________

SPECIFIC ACADEMIC APTITUDE IN SOCIAL STUDIES

Please check the characteristics that accurately describe your child’s typical behaviors.

☐ Is sensitive to social issues, concerned with moral and ethical questions
☐ Knowledgeable about current events
☐ Shows interest in learning a foreign language
☐ Has a high interest level in global issues of environment, endangered species, etc.
☐ Enjoys learning about the past, present, and future
☐ Exhibits great desire to earn high grades
☐ Is eager to tell others about discoveries and shows excitement in voice when talking about this subject
☐ Usually prefers to work individually
☐ Is eager to complete tasks
☐ Is inquisitive, asks questions
☐ Is very alert; supplies, rapid answers to questions in this subject
☐ Enjoys talking with experts in this subject
☐ Understands cause and effect
☐ Can apply knowledge to a variety of social science related issues
☐ Enjoys informational programs
☐ Has interest in people

Additional Comments:
To the parent(s)/guardian(s) of ______________________________:

As you know, your child was referred as a possible candidate for the Gifted & Talented education program in the specific academic area(s) of ______________________________. We have reviewed the referrals and documentation to support them. Based on your child’s MAP scores, the teacher checklist, and the parent checklist, the recommendation has been approved. I’m sure that you are very proud of your child’s accomplishments!

Once a student is formally identified as Gifted & Talented in an area, he or she remains identified and receives gifted services in that area until he or she graduates from high school. However, a student can be referred for additional areas of identification at any time if there is evidence to support the referral.

Your child’s Gifted/Talented Student Services Plan is attached. Please review it, sign the bottom, and return it to school as soon as possible. I will make a copy of the signed form and send it home for you to keep for your records. Please don’t hesitate to contact me with any questions.

Again, congratulations on your child’s success!

Thank you,
CAMPBELL COUNTY SCHOOLS
GIFTED & TALENTED IDENTIFICATION PROCESS

Student: ____________________ School: ____________________

Identification Area: Specific Academic Area Date: ________________
____ Reading/Language Arts
____ Mathematics
____ Science
____ Social Studies

Evidence:
Specific Academic Aptitude Evidence:

☐ Anecdotal records
☐ Checklist inventories

☐ Checklist inventories (underachieving or disadvantaged)
☐ Collection of evidence from portfolios

☑ Within the ninth stanine on one subject test score of an achievement test
☐ Continuous progress data

☐ Formal testing data
☐ High performance on test of academic achievement

☐ Informal assessments
☐ Nominations-Peer

☐ Nominations-Self or Petition
☐ Off-level testing

☐ Portfolio of high academic performance
☐ Primary review committee

☐ Referrals/Recommendations-Parent
☐ Referrals/Recommendations-Teacher

☐ Student awards or critiques
☐ Student progress data

☐ Other, Specify ____________________

Achievement Test

MAP K-PREP PLAN EXPLORE ACT

Notes: ________________________________

________________________________________________________________________

________________________________________________________________________

Signatures: ____________________ ____________________ ____________________

________________________________________________________________________

________________________________________________________________________

Campbell County Schools
Gifted & Talented Handbook
Developed 2012 by Amity Kukla
Visual & Performing Arts
Visual and Performing Arts
(4th – 12th)

Definition (as defined is 704 KAR 3:285 – Gifted and Talented Services):
Possessing either demonstrated or potential ability to perform at an exceptionally high level in visual or performing arts and demonstrating the potential for outstanding aesthetic production, accomplishment, or creativity in areas such as art, music, drama, speech, and in activities requiring gross or fine motor skills.

Possible Areas of Identification:
- Art
- Music
- Drama
- Dance

Screening Tool: Jot Downs (separate jot down for each area)
Classroom teachers or parent/guardian, along with teacher most responsible for delivering the specific area of visual or performing arts curriculum, will complete the Jot Down for each area in February.

Identification:
Students listed in 14 out of the 16 boxes on the Jot Down will be invited to audition (at the district level) in front of a committee of “experts.” They will perform or present a showcase of their work in the area(s) of recommendation. At least two other pieces of evidence (including the audition) must be considered by the identification committee before a student receives services.

Other Evidence May Include:
- Teacher Nomination/Checklist
- Anecdotal Notes
- Parent Checklist
- Letter of Recommendation from a Professional Art, Music, Drama, or Dance Teacher
- Portfolio of Visual or Performing Ability
- Awards or Critiques of Performance
### Campbell County Schools: Visual Arts Jot Down

**Teacher Name:** ______________________  **Date:** ____________

<table>
<thead>
<tr>
<th>May be asked by others to do art work</th>
<th>Likes to comment on colors, shapes, and structure of things</th>
<th>Enjoys and appreciates or may be critical of own art work and work of others</th>
<th>Takes pride in doing things well</th>
</tr>
</thead>
<tbody>
<tr>
<td>Draws or doodles a lot in school/home</td>
<td>Does outstanding original art work</td>
<td>Likes to use many different materials</td>
<td>Enjoys talking about art and collecting works of art</td>
</tr>
<tr>
<td>Masters basic art skills quickly and easily</td>
<td>Has a keen sense of humor/ makes unusual connections with drawing</td>
<td>Concentrates on art projects for long periods/ may shut out other things going on around them</td>
<td>Creates exceptional charts, graphs, models, or other visuals when given the opportunity</td>
</tr>
<tr>
<td>Demonstrates elaboration in art work</td>
<td>Has a sensitive use of line/ color/ texture</td>
<td>Enjoys open-ended art activities</td>
<td>Has an appreciation of beautiful objects</td>
</tr>
</tbody>
</table>
### Campbell County Schools: Music Jot Down

**Teacher Name:** ____________________  **Date:** ____________

<table>
<thead>
<tr>
<th>Perceives fine differences in sound</th>
<th>Easily remembers melodies and can reproduce them accurately</th>
<th>Sensitive to rhythm/may tap fingers or feet while working</th>
<th>Sustained interest in musical activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Expresses feelings or emotions through music</td>
<td>Makes up original tunes</td>
<td>May hum or sing to break the silence</td>
<td>Interested in musical symbols</td>
</tr>
<tr>
<td>Can identify short rhythmic patterns as same or different</td>
<td>Likes to perform musically</td>
<td>Sings on pitch</td>
<td>Able to perform musically with a high degree of technical difficulty</td>
</tr>
<tr>
<td>Interested in musical instruments</td>
<td>Enjoys musical performances</td>
<td>Can play or would like to play a musical instrument</td>
<td>Is interested in and learns musical symbols quickly</td>
</tr>
</tbody>
</table>
### Campbell County Schools: Drama Jot Down

**Teacher Name:** ________________  **Date:** __________

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Eager to participate</strong></td>
<td><strong>Effectively uses</strong></td>
<td><strong>Commands and</strong></td>
<td><strong>Able to evoke emotional responses</strong></td>
</tr>
<tr>
<td>in classroom plays or skits</td>
<td>voice, gestures, and facial expressions to communicate feelings</td>
<td>holds the attention of a group when speaking</td>
<td>from listeners/ can get people to laugh, frown, feel tense, etc.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Can imitate others</strong> – is able to mimic the way people talk, gesture, etc.</td>
<td><strong>Readily shifts into</strong></td>
<td><strong>Imaginative – has a strong sense of fantasy</strong></td>
<td><strong>May daydream at times</strong></td>
</tr>
<tr>
<td></td>
<td>the role of another character</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Sensitive to beauty</strong> – attends to aesthetic attributes of things</td>
<td><strong>Seems to pick up skills in drama without instruction</strong></td>
<td><strong>Invents new techniques/ experiments</strong></td>
<td><strong>Sense of humor – sees humor in situations others do not see</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Sees minute details in performances</strong></td>
<td><strong>High in sensory sensitivity</strong></td>
<td><strong>Uses drama to express experiences or feelings</strong></td>
<td><strong>Appears reflective or idealistic</strong></td>
</tr>
</tbody>
</table>

*Campbell County Schools*
*Gifted & Talented Handbook*
*Developed 2012 by Amity Kukla*
### Campbell County Schools: Dance Jot Down

**Teacher Name:** __________________________ **Date:** ____________

<table>
<thead>
<tr>
<th>Uses body as an instrument of expression</th>
<th>Enjoys forms of dancing and movement to music</th>
<th>Uses movement to recreate an emotion or environment</th>
<th>Able to think of many ways of solving movement problems</th>
</tr>
</thead>
<tbody>
<tr>
<td>Displays grace and fluidity of movement</td>
<td>Likes to dance for other people</td>
<td>Is good at imitating movement of others</td>
<td>Can change direction, level, and focus of movement</td>
</tr>
<tr>
<td>Masters basic dance skills quickly and easily</td>
<td>Improvises to music</td>
<td>Has awareness of line and the design of body in space</td>
<td>Appears to feel the rhythm of music</td>
</tr>
<tr>
<td>Likes to spend time watching others dance</td>
<td>Communicates to others through their dance</td>
<td>Deals effectively with own center for gravity</td>
<td>Experiences great joy in movement</td>
</tr>
</tbody>
</table>
Campbell County Schools Gifted & Talented Nomination Forms

Student Name: _____________________________  Teacher Name: ______________________
School: __________________________________  Grade: __________  Date: _______________

VISUAL AND PERFORMING ARTS: VISUAL ARTS

A.  Indications (check all that apply):
    ☐  Observed strengths in the area of visual arts
        (Attach an explanation or description.)
    ☐  Has won an award in visual arts (in or out of school)
        Award: __________________________________________________________________
    ☐  Other: __________________________________________________________________

B.  Anecdotal (Attachment)

C.  Additional information that you believe is relevant. (Attachment)

D.  Visual Arts Checklist (Below)

(MUST BE COMPLETED FOR RECOMMENDED STUDENTS)

Please check the characteristics which accurately describe the TYPICAL behavior of this student.

☐  May be asked by others to do artwork
☐  Likes to comment on colors, shapes, and structure of things
☐  Enjoys and appreciates or may be critical of own artwork and work of others
☐  Takes pride in doing things well
☐  Draws or doodles a lot in school/home
☐  Does outstanding original artwork
☐  Likes to use many different materials
☐  Enjoys talking about, collecting, and/or looking at works of art
☐  Masters basic art skills quickly and easily
☐  Has a keen sense of humor/makes unusual connections with drawing
☐  Concentrates on art projects for long periods of time
☐  May shut out other things going on around him/her
☐  Creates exceptional charts, graphs, models, or other visuals when given the opportunity
☐  Demonstrates elaboration in artwork
☐  Has a sensitive use of line/color/texture
☐  Enjoys open-ended art activities

☐  Has an appreciation of beautiful objects.
☐  Capable of “finding” or “making” art.

Campbell County Schools
Gifted & Talented Handbook
Developed 2012 by Amity Kukla
Campbell County Schools Gifted & Talented Nomination Forms

Student Name: _____________________________  Teacher Name: ______________________
School: __________________________________  Grade: __________  Date: _______________

VISUAL AND PERFORMING ARTS: MUSIC

A. Indications (check all that apply):
   ☐ Observed strengths in the area of music
      (Attach an explanation or description.)
   ☐ Has won an award in music (in or out of school)
      Award: ________________________________________________________________
   ☐ Other: __________________________________________________________________

B. Anecdotal (Attachment)

C. Additional information that you believe is relevant. (Attachment)

D. Music Checklist (Below)

(MUST BE COMPLETED FOR RECOMMENDED STUDENTS)

Please check the characteristics which accurately describe the TYPICAL behavior of this student.

☐ Perceives fine differences in sound
☐ Easily remembers melodies and can reproduce them accurately
☐ Sensitive to rhythm – may tap fingers or feet while working
☐ Sustained interest in musical activities
☐ Expresses feelings or emotions through music or sound
☐ Makes up original tunes
☐ May hum or sing to break the silence
☐ Interested in musical symbols
☐ Can identify short rhythmic patterns as same or different
☐ Likes to perform musically
☐ Sings on pitch
☐ Able to perform musically with a high degree of technical difficulty
☐ Interested in musical instruments
☐ Enjoys musical performances
☐ Can play or would like to play a musical instrument
☐ Is interested in and learns musical symbols quickly
Campbell County Schools Gifted & Talented Nomination Forms

Student Name: _____________________________  Teacher Name: ______________________
School: __________________________________  Grade: __________  Date: _______________

VISUAL AND PERFORMING ARTS: DRAMA

A. Indications (check all that apply):
   ☐ Observed strengths in the area of drama  (Attach an explanation or description.)
   ☐ Has won an award in drama (in or out of school)
      Award: ________________________________________________________________
   ☐ Has had a part in a play (in or out of school)
      Part(s): ________________________________________________________________
   ☐ Other: _________________________________________________________________

B. Anecdotal (Attachment)

C. Additional information that you believe is relevant. (Attachment)

D. Drama Checklist (Below)

(MUST BE COMPLETED FOR RECOMMENDED STUDENTS)

Please check the characteristics which accurately describe the TYPICAL behavior of this student.

☐ Eager to participate in classroom plays or skits
☐ Effectively uses voice, gestures, and facial expressions to communicate feelings
☐ Commands and holds the attention of a group while speaking
☐ Able to evoke emotional responses from listeners – can get people to laugh, frown, feel tense, etc.
☐ Can imitate others – is able to mimic the way people speak, talk, gesture
☐ Readily shifts into the role of another character
☐ Imaginative – has a strong sense of fantasy
☐ May daydream at times
☐ Sensitive to beauty – attends to aesthetic attributes of things
☐ Seems to pick up skills in drama without instruction
☐ Invents new techniques, experiments
☐ Sense of humor – sees humor in situations others do not see
☐ Sees minute details in performances
☐ High in sensory sensitivity
☐ Uses drama to express experiences or feelings
☐ Appears reflective or idealistic
Campbell County Schools Gifted & Talented Nomination Forms

Student Name: _____________________________  Teacher Name: ______________________
School: __________________________________  Grade: __________  Date: _______________

VISUAL AND PERFORMING ARTS: DANCE

A. Indications (check all that apply):
   - [ ] Observed strengths in the area of dance
     (Attach an explanation or description.)
   - [ ] Has won an award in dance (in or out of school)
     Award: ______________________________________________________________
   - [ ] Has had a part in a dance production (in or out of school)
     Part(s): ______________________________________________________________
   - [ ] Other: _____________________________________________________________

B. Anecdotal (Attachment)

C. Additional information that you believe is relevant. (Attachment)

D. Dance Checklist (Below)

(MUST BE COMPLETED FOR RECOMMENDED STUDENTS)

Please check the characteristics which accurately describe the TYPICAL behavior of this student.

- [ ] Uses body as an instrument of expression
- [ ] Enjoys forms of dancing and movement to music
- [ ] Uses movement to recreate an emotion or environment
- [ ] Able to think of many ways of solving movement problems
- [ ] Displays grace and fluidity of movement
- [ ] Likes to dance for other people
- [ ] Is good at imitating movement of others
- [ ] Can change direction, level, and focus of movement
- [ ] Masters basic dance skills quickly and easily
- [ ] Improvises to music
- [ ] Has awareness of line and the design of body in space
- [ ] Appears to feel the rhythm of music
- [ ] Likes to spend time watching others dance
- [ ] Communicates to others through dance
- [ ] Deals effectively with own center for gravity
- [ ] Experiences great joy in movements
Campbell County Schools Gifted and Talented Nomination Forms

Student Name: ___________________ Teacher Name: ___________________
School: _________________________ Grade: _____ Date: _____________

Anecdotal Notes

Gifted/Talented Area (circle one): Visual Arts
Music
Drama
Dance

Please comment on the following:
Level of performance:

Special strengths and weaknesses:

Needs caused by giftedness:

Ability to work independently and focus responsibility on specific area:
Date: __________________________

To the parent(s)/guardian(s) of _________________________________,

We are pleased to inform you that your child, _________________________________, has been referred as a possible candidate for the Gifted & Talented education program in the area of Visual and Performing Arts with a focus in ___________. Visual or performing arts ability (as defined in 704 KAR 3:285 – Gifted & Talented Services) means: Possessing either demonstrated or potential ability to perform at an exceptional high level in visual or performing arts and demonstrating the potential for outstanding aesthetic production, accomplishment, or creativity in areas such as art, dance, music, drama, speech, and in activities requiring gross or fine motor skills.

Your child has also been invited to audition in front of a committee of “experts.” He or she may perform or present a showcase of his or her work. The auditions will be held:

Date: ________________________
Time: ________________________
Place: ________________________

Transportation to and from the audition must be provided by the parent/guardian or other designee.

According to Kentucky regulations, at least three pieces of informal or formal measures are required in order to identify a student for Gifted & Talented services. In addition to a teacher checklist of indicators and the audition process, other measures may include a letter of recommendation from a professional art, drama, music, or dance teacher, a portfolio of visual or performing ability, or awards or critiques of performance. As a partner with us in your child’s education, your input is valuable. Please complete the attached checklist(s) and return them to school by ____________________________.

A committee will be reviewing the evidence, and you will be notified as to whether or not your child has been identified as Gifted & Talented and in what areas. Please do not hesitate to contact me via phone or email if you have any questions or concerns. Thank you for working together with us to provide your child with the best education possible!

Thank you,
Campbell County Schools Gifted & Talented Parent Checklist

Student Name: _________________________________  Teacher Name: __________________
School: __________________________________ Grade: ______  Date: ___________________
Parent/Guardian Signature: _____________________________________________

VISUAL AND PERFORMING ARTS: VISUAL ARTS

Indications (check all that apply):
☐ Has won an award in any area of visual arts (in or out of school)
  Explain: ________________________________
☐ Observed strengths in the area of visual arts
  Explain: ________________________________
☐ Has taken lessons or classes outside of the school setting
  Explain: ________________________________
☐ Letter of recommendation attached (optional)

Please check the characteristics that accurately describe your child’s typical behaviors.
☐ May be asked by others to do artwork
☐ Likes to comment on colors, shapes, and structure of things
☐ Enjoys and appreciates or may be critical of own artwork and work of others
☐ Takes pride in doing things well
☐ Draws or doodles a lot in school/home
☐ Does outstanding original artwork
☐ Likes to use many different materials
☐ Enjoys talking about, collecting, and/or looking at works of art
☐ Masters basic art skills quickly and easily
☐ Has a keen sense of humor/makes unusual connections with drawing
☐ Concentrates on art projects for long periods of time
☐ May shut out other things going on around him/her
☐ Creates exceptional charts, graphs, models, or other visuals when given the opportunity
☐ Demonstrates elaboration in artwork
☐ Has a sensitive use of line/color/texture
☐ Enjoys open-ended art activities
☐ Has an appreciation of beautiful objects.
☐ Capable of “finding” or “making” art.

Additional Comments: (Use back)
Campbell County Schools Gifted & Talented Parent Checklist

Student Name: _______________________________ Teacher Name: __________________
School: ___________________________________ Grade: ______  Date: ___________________
Parent/Guardian Signature: ________________________________

VISUAL AND PERFORMING ARTS: MUSIC

Indications (check all that apply):

☐ Has won an award in any area of music (in or out of school)
  Explain: _________________________________________________________________

☐ Observed strengths in the area of music
  Explain: _________________________________________________________________

☐ Has taken lessons or classes outside of the school setting
  Explain: _________________________________________________________________

☐ Letter of recommendation attached (optional)

Please check the characteristics that accurately describe your child’s typical behaviors.

☐ Perceives fine differences in sound

☐ Easily remembers melodies and can reproduce them accurately

☐ Sensitive to rhythm – may tap fingers or feet while working

☐ Sustained interest in musical activities

☐ Expresses feelings or emotions through music or sound

☐ Makes up original tunes

☐ May hum or sing to break the silence

☐ Interested in musical symbols

☐ Can identify short rhythmic patterns as same or different

☐ Likes to perform musically

☐ Sings on pitch

☐ Able to perform musically with a high degree of technical difficulty

☐ Interested in musical instruments

☐ Enjoys musical performances

☐ Can play or would like to play a musical instrument

☐ Is interested in and learns musical symbols quickly

Additional Comments: (Use back)
Campbell County Schools Gifted & Talented Parent Checklist

Student Name: _________________________________  Teacher Name: __________________
School: ______________________________________  Grade: ______  Date: ________________
Parent/Guardian Signature: _____________________________________________

VISUAL AND PERFORMING ARTS: DRAMA

Indications (check all that apply):

□ Has won an award in any areas of drama (in or out of school)
  Explain: ____________________________________________________________________

□ Observed strengths in the area of drama
  Explain: ____________________________________________________________________

□ Has taken lessons or classes outside of the school setting
  Explain: ____________________________________________________________________

□ Has had a part in a play (in or out of school)
  Explain: ____________________________________________________________________

□ Letter of recommendation attached (optional)

Please check the characteristics that accurately describe your child’s typical behaviors.

☐ Eager to participate in classroom plays or skits

☐ Effectively uses voice, gestures, and facial expressions to communicate feelings

☐ Commands and holds the attention of a group while speaking

☐ Able to evoke emotional responses from listeners – can get people to laugh, frown, etc.

☐ Can imitate others – is able to mimic the way people speak, talk, gesture

☐ Readily shifts into the role of another character

☐ Imaginative – has a strong sense of fantasy

☐ May daydream at times

☐ Sensitive to beauty – attends to aesthetic attributes of things

☐ Seems to pick up skills in drama without instruction

☐ Invents new techniques, experiments

☐ Sense of humor – sees humor in situations others do not see

☐ Sees minute details in performances

☐ High in sensory sensitivity

☐ Uses drama to express experiences or feelings

☐ Appears reflective or idealistic

Additional Comments: (Use back)
Campbell County Schools Gifted & Talented Parent Checklist

Student Name: _________________________________  Teacher Name: __________________
School: _____________________________________ Grade: ______  Date: ________________
Parent/Guardian Signature: _________________________________

VISUAL AND PERFORMING ARTS: DANCE

Indications (check all that apply):

- □ Has won an award in any areas of dance (in or out of school)
  Explain: _____________________________________________________________

- □ Observed strengths in the area of dance
  Explain: _____________________________________________________________

- □ Has taken lessons or classes outside of the school setting
  Explain: _____________________________________________________________

- □ Letter of recommendation attached (optional)

Please check the characteristics that accurately describe your child’s typical behaviors.

- □ Uses body as an instrument of expression
- □ Enjoys forms of dancing and movement to music
- □ Uses movement to recreate an emotion or environment
- □ Able to think of many ways of solving movement problems
- □ Displays grace and fluidity of movement
- □ Likes to dance for other people
- □ Is good at imitating movement of others
- □ Can change direction, level, and focus of movement
- □ Masters basic dance skills quickly and easily
- □ Improvises to music
- □ Has awareness of line and the design of body in space
- □ Appears to feel the rhythm of music
- □ Likes to spend time watching others dance
- □ Communicates to others through dance
- □ Deals effectively with own center for gravity
- □ Experiences great joy in movements

Additional Comments: (Use back)
Campbell County Schools Talent Search

Student’s Name: ___________________________ Grade: ________
School: ___________________________________ Homeroom Teacher: ______________

Please circle the talent area and complete the information. If you need more space, please write on the back of this sheet. Thank you.

**Talent Areas:**

**Music**       Voice       Instrumental

Classes/Dates:   __________________________________________________________________

Performances/Dates:   __________________________________________________________________

Awards/Prizes:   __________________________________________________________________

**Visual Arts**   Drawing       Painting       Sculpture       Other:____________________

Classes/Dates:   __________________________________________________________________

Portfolio Contents:   __________________________________________________________________

Awards/Prizes:   __________________________________________________________________

**Drama/Speech**

Classes/Dates:   __________________________________________________________________

Performances/Dates:   __________________________________________________________________

Awards/Prizes:   __________________________________________________________________

**Dance/Movement**

Classes/Dates:   __________________________________________________________________

Performances/Dates:   __________________________________________________________________

Awards/Prizes:   __________________________________________________________________
Date: __________________________________________

To the parent(s)/guardian(s) of ____________________________:

As you know, your child was referred as a possible candidate for the Gifted & Talented education program in the area of **Visual or Performing Arts**: _______________. Based on the teacher’s recommendation, the parent checklist, and other documentation, the committee has approved the recommendation. I’m sure that you are very proud of your child’s accomplishments!

Once a student is formally identified as Gifted & Talented in an area, he or she remains identified and receives gifted services in that area until he or she graduates from high school. However, a student can be referred for additional areas of identification at any time if there is evidence to support the referral.

Your child’s Gifted/Talented Student Services Plan is attached. Please review it, sign the bottom, and return it to school as soon as possible. I will make a copy of the signed form and send it home for you to keep for your records. Please don’t hesitate to contact me with any questions.

Again, congratulations on your child’s success!

Thank you,
CAMPBELL COUNTY SCHOOLS
GIFTED & TALENTED IDENTIFICATION PROCESS

Student: ___________________________  School: ___________________________

Identification Area:  VISUAL/PERFORMING ARTS

<table>
<thead>
<tr>
<th></th>
<th>Art</th>
<th></th>
<th>Dance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Art</td>
<td></td>
<td>Drama</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Music</td>
</tr>
</tbody>
</table>

Date: _______________________

Evidence:

**Visual/Performing Arts Evidence:**

- [ ] Auditions
- [ ] Checklist of behaviors specific to gifted category
- [ ] Peer recommendations
- [ ] Portfolio of visual or performing arts ability
- [ ] Questionnaires
- [ ] Referrals/Recommendations-Teacher
- [ ] Other, specify

- [ ] Awards or critiques of performance
- [ ] Letters of recommendations
- [ ] Portfolio assessment by specialists or professional artists
- [ ] Products (paper, video, audio, pictures)
- [ ] Referrals/Recommendations-Parent
- [ ] Nominations-Self or Petition

Notes:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Signatures:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
Primary Talent Pool (K-3rd)
Primary Talent Pool (K-3rd)

Definition (as defined is 704 KAR 3:285 – Gifted and Talented Services):
A group of primary students informally selected as having characteristics and behaviors of a high potential learner and further diagnosed using a series of informal and formal measures to determine differentiated service delivery needs during their stay in the primary program.

Screening Tools:
Measure of Academic Progress (MAP) Tests
Students in the Campbell County Schools are administered the Measure of Academic Progress (MAP) tests three times per year (fall, winter, and spring). MAP is a norm-referenced test. At this time, the areas tested in the primary grades are reading and math.

Primary Talent Pool Jot Down
Classroom teachers will complete the Talent Pool Jot Down tool in November.

Identification:
MAP - Students who earn two scores at or above the 90th percentile on the Reading OR Math MAP tests within the last three testing administrations are considered for identification. At least two other pieces of evidence must be considered by the identification committee before a student receives services.

Jot Down – Students listed in 15 out of 17 boxes on the Jot Down are considered for Primary Talent Pool identification. At least two other pieces of evidence must be considered by the identification committee before a student receives services.

Other Evidence May Include:
- Teacher Nomination/Checklist
- Anecdotal Notes
- Parent Checklist
- Student Work Samples
<table>
<thead>
<tr>
<th>Shows evidence of an advanced vocabulary</th>
<th>Is reading at least one year above grade level</th>
<th>Is eager to explore patterns and puzzles</th>
<th>Reasons/ responds quickly</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enjoys problem-solving situations</td>
<td>Questions “what if” or “why” frequently</td>
<td>Is resistant to drill and practice</td>
<td>Displays a developed sense of fairness</td>
</tr>
<tr>
<td>Becomes bored easily</td>
<td>Keenly observant of environment/ activities</td>
<td>Has an unusually good memory</td>
<td>Shows talent in visual and performing arts</td>
</tr>
<tr>
<td>Demonstrates persistence</td>
<td>Displays a good sense of humor</td>
<td>Creates new ways to bridge unrelated ideas</td>
<td>Displays leadership with class activities</td>
</tr>
<tr>
<td>Is knowledgeable of things not yet taught</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Campbell County Schools Gifted & Talented Nomination Forms

Student Name: _____________________________  Teacher Name:  ______________________
School: __________________________________  Grade: __________  Date: _______________

Primary Talent Pool Nomination Form

A. Indications (check all that apply):
   ☐ National normed scores - MAP
   Date: _______  Reading Score: _____%ile
   Math Score: _____%ile
   Date: _______  Reading Score: _____%ile
   Math Score: _____%ile

B. Anecdotal: Please use attachment to comment on student’s:
   ☐ Level of performance
   ☐ Special strength and weaknesses
   ☐ Needs caused by giftedness
   ☐ Ability to work independently and focus responsibly

C. Student’s work that substantiates giftedness in science. (Attachment)
D. Additional information that you believe is relevant. (Attachment)
E. Primary Talent Pool Checklist (Below)

(MUST BE COMPLETED FOR RECOMMENDED STUDENTS)

Please check the characteristics which accurately describe the TYPICAL behavior of this student.

☐ Demonstrates evidence of an advanced vocabulary
☐ Is reading above grade level
☐ Is eager to explore patterns and puzzles
☐ Reasons/ responds quickly
☐ Enjoys problem-solving situations
☐ Questions “what if” or “why” frequently
☐ Is resistant to drill and practice
☐Displays a developed sense of fairness
☐ Becomes bored easily
☐ Keenly observant of the environment/ activities
☐ Has an unusually good memory
☐ Shows talent in visual and performing arts
☐ Demonstrates persistence
☐ Displays a good sense of humor
☐ Creates new ways to bridge unrelated ideas
☐ Displays leadership with class activities
☐ Is knowledgeable of things not yet taught
Campbell County Schools Gifted and Talented Nomination Forms

Student Name: _____________________ Teacher Name: ______________
School: ___________________________ Grade: _____ Date: ____________

Anecdotal Notes
Gifted/Talented Area: Primary Talent Pool

Please comment on the following:
Level of performance:

Special strengths and weaknesses:

Needs caused by giftedness:

Ability to work independently and focus responsibility on specific area:
Date: _______________________________

To the parent(s)/guardian(s) of ___________________________________,

We are pleased to inform you that your child, _________________________________, has been referred for the **Primary Talent Pool**. The Primary Talent Pool includes students in kindergarten through third grade who possess demonstrated or potential ability to perform at exceptionally high levels. The purpose of selecting students for the Primary Talent Pool is to provide enrichment in order to fully develop the students’ talents and abilities.

According to Kentucky regulations, at least three pieces of evidence are required in order to place a student in the Primary Talent Pool. These may include norm-referenced test (MAP) scores above the 90th percentile, work samples, teacher checklists, or parent checklists. The evidence is then reviewed by the school committee, and a decision is made. As a partner with us in your child’s education, your input is valuable. Please complete the attached checklist and return it to school by ________________________.

A committee will be reviewing the evidence, and you will be notified as to whether or not your child has been selected. **Please note: Formal identification for the Gifted and Talented program begins in the fourth grade. Students placed in the Primary Talent Pool are not automatically identified as gifted in the fourth grade.** They must go through the formal identification process and meet certain criteria.

Please do not hesitate to contact me via phone or email if you have any questions or concerns. Thank you for working together with us to provide your child with the best education possible!

Thank you,
Campbell County Schools Primary Talent Pool Parent Checklist

Student Name: ________________________  Teacher Name: ________________________
School: ________________________________  Grade Level: ____________
Name of parent/guardian completing checklist: ________________________________
Signature of parent/guardian completing checklist: ________________________________

Please check the characteristics that accurately describe your child’s typical behaviors.

☐ Abstract reasoning and problem-solving skills
☐ Advanced progression through developmental milestones
☐ Curiosity
☐ Early and extensive language development
☐ Early recognition of caretakers (for example, smiling)
☐ Enjoyment and speed of learning
☐ Excellent sense of humor
☐ Extraordinary memory
☐ High activity level
☐ Intense reactions to noise, pain, or frustration
☐ Less need for sleep in infancy
☐ Long attention span
☐ Sensitivity and compassion
☐ Perfectionism
☐ Unusual alertness in infancy
☐ Vivid imagination (for example, imaginary companions)
☐ Enjoys problem-solving situations
☐ Creates new ways to connect unrelated ideas
☐ Demonstrates talent in visual and performing arts
☐ Demonstrates unusual or unconventional social skills
☐ Becomes bored easily
☐ Demonstrates persistence
☐ Uses and understands an advanced vocabulary

Parent/Guardian comments/additional information – Please use the back of this form.
To the parent(s)/guardian(s) of ________________________________,

As you know, your child was referred as a possible candidate for the **Primary Talent Pool**. Based on the evidence collected, the recommendation has been approved. I’m sure that you are very proud of your child’s accomplishments!

The Primary Talent Pool includes students in kindergarten through third grade who possess demonstrated or potential ability to perform at exceptionally high levels. The purpose of selecting students for the Primary Talent Pool is to provide enrichment in order to fully develop the students’ talents and abilities. Students in the Primary Talent Pool should receive differentiated instruction **in the classroom when appropriate**. This means that teachers may extend content or provide enrichment activities that are matched to the students’ needs, interests, and abilities. **Please note: Formal identification for the Gifted and Talented program begins in the fourth grade. Students placed in the Primary Talent Pool are not automatically identified as gifted in the fourth grade.** They must go through the formal identification process and meet certain criteria.

I’m sure that you are very proud of your child’s success! Please do not hesitate to contact me via phone or email if you have any questions or concerns. Thank you for working together with us to provide your child with the best education possible!

Thank you,
# CAMPBELL COUNTY SCHOOLS
## GIFTED & TALENTED IDENTIFICATION PROCESS

**Student:** __________________________  **School:** __________________________

**Identification Area:** **PRIMARY TALENT POOL**  **Date:** _______________

**Evidence:**

<table>
<thead>
<tr>
<th>Evidence</th>
<th></th>
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<tbody>
<tr>
<td>Available formal test data</td>
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<tr>
<td>Checklist inventories of behaviors specific to gifted categories</td>
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<tr>
<td>Continuous Progress Data</td>
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<tr>
<td>Parent interview or questionnaire</td>
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<tr>
<td>Primary review committee recommendation</td>
<td></td>
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<tr>
<td>Anecdotal records</td>
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<tr>
<td>Collection of evidence demonstrating student performance</td>
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<tr>
<td>Diagnostic data (screening measure)</td>
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<td>Petition system</td>
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<tr>
<td>Other, Specify</td>
<td></td>
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</tbody>
</table>

**Notes:**

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

**Signatures:**

_________________________________  _________________________  ________________

_________________________________  _________________________  ________________

_________________________________  _________________________  ________________
Appendix
Date:________________________

To the parent(s)/guardian(s) of ______________________________:

As you know, your child was referred as a possible candidate for the Gifted & Talented education program in the area of __________________________. The Gifted & Talented committee met on ____________________, to review the referrals and documentation to support them. At this time, the committee members decided that more documentation was needed in order to make a well-informed decision. Therefore, the committee will reconsider the referral next school year. The committee will meet again, and you will be notified of their decision. Please don't hesitate to contact me with any questions about this process.

Thank you,
The Campbell County School District has developed guidelines for the identification of gifted/talented students. (These guidelines are provided in our online Gifted & Talented Handbook or by request through your child’s staff developer.) Through this process, your child has been identified as having demonstrated or potential ability in the following areas:

**Area(s) of Giftedness: ___________________________________________**

The services your child will receive are checked below:

<table>
<thead>
<tr>
<th>Check if Provided</th>
<th>Service Delivery Options:</th>
<th>Teacher Providing Service(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Various Acceleration Options <em>(Circle all that apply.)</em></td>
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<tr>
<td></td>
<td>• Early Exit from Primary</td>
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<td></td>
<td>• Grade Skipping</td>
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<td></td>
<td>• Subject Area Higher Grade Level</td>
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<td></td>
<td>• Dual Enrollment Courses</td>
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<td>• Dual Credit Courses</td>
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<td>• Early Exit from High School</td>
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<td>Advanced Placement and Honors Courses</td>
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<td>Collaborative Teaching and Consultation Services</td>
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<td></td>
<td>Special Counseling Services</td>
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<td></td>
<td>Differentiated Study Experiences in the Classroom</td>
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<td></td>
<td><em>Circle: Individual or Cluster Groups</em></td>
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<td>Distance Learning <em>(Circle all that apply.)</em></td>
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<td>KVHS Courses</td>
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<td>Video Courses</td>
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<td>Other Online Course</td>
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<td>Enrichment Services (school day)</td>
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<td>Independent Study</td>
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<td>Mentorships</td>
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<td>Resource Services <em>(Circle all that apply.)</em></td>
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<td>• Pull-out Setting</td>
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<td>• Appropriate Instructional Setting</td>
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<td></td>
<td>• Consortium</td>
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<td></td>
<td>Seminars</td>
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<td>Travel Study Options</td>
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<td>Special Schools (4-12)</td>
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<td>Self-contained Classrooms (4-12)</td>
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Please sign below to signify that you have read and reviewed your child’s service delivery plan. For additional information and further input on your child’s services, please contact your child’s principal or staff developer.

_________________________ ____________________
(Parent/Guardian Signature) (Date)

_____ Please check here if you do **NOT** want your child to receive GT services.
Individual Progress Report
Campbell County Schools Gifted Services

Student Name: 
School: 
Grade:

Area of Identification:

☐ General Intellectual Ability
☐ Language Arts
☐ Visual Arts

☐ Creativity
☐ Mathematics
☐ Dance

☐ Leadership
☐ Science
☐ Music

☐ Social Studies
☐ Drama

Service Options:

☐ Acceleration
☐ AP/Honors
☐ Collaboration/Consultation

☐ Special Counseling
☐ Differentiated Study
☐ Distance Learning

☐ Enrichment Services
☐ Independent Study
☐ Mentorships

☐ Seminars
☐ Travel Study
☐ Special Schools

☐ Self-Contained Classrooms

Other:

Skill Attainment:

*Indicate level of attainment for each skill.*

1—Made Progress

2—Did Not Make Progress

N/A—Not Applicable to the Area of Identification or Service

_____ Enhanced Knowledge/Performance _____ Enriched Understanding

_____ Developed Problem Solving _____ Advanced Leadership

_____ Enhanced Interpersonal Skills _____ Enriched Technology Skills

_____ Improved Learning/Study Skills _____ Developed Self-Sufficiency

_____ Enhanced Stage Presence _____ Participated in Community Activities

Comments/Suggestions:

Reviewer ___________________________ Date of Review ___________ Semester/Trimester ____________

Campbell County Schools
Gifted & Talented Handbook
Developed 2012 by Amity Kukla
Date: ____________________________

To the Parent(s)/Guardian(s) of: ________________________________.

I am pleased to inform you that your child has been identified as one of a select group of students qualified to participate in the 4th/5th Grade Talent Search sponsored by the Duke University Talent Identification Program (Duke TIP). This opportunity offers recognition of a student’s outstanding academic abilities and motivational and informational resources through publications and online opportunities. Your child’s excellent performance on one or more areas of the MAP (Measure of Academic Progress) test qualifies him or her to participate in this highly selective program:

Please see the Duke TIP 4th/5th Grade Talent Search brochure for details and instructions on enrollment and deadline information. If you choose to enroll, you may do so easily at www.tip.duke.edu/45enroll. Online enrollments receive faster processing. Alternately, you may complete the paper application that has been included with this letter. (The qualifying test section has already been completed for you.) Use the following School ID code when applying online or by paper: _____________________. The deadline for registration is ________________________.

This letter is NOT an application; it is a notice that you qualify. You must enroll online or submit a paper application to enroll in the 4th/5th Grade Talent Search. If you have questions, please feel free to contact me or call Duke TIP directly at (919) 668-9100.

Congratulations on this honor!

Thank you,