

Eminence Independent Schools

Gifted & Talented Program

Gifted Student Services Plan (GSSP) Grades 4-12



Student's Name:

School:

Grade:

School
Year:

Area(s) of Identification

Based on formal and informal evidence this student qualifies for services in the following area(s):

Creativity	General Intellectual Ability	Leadership
Specific Academic: Language Arts	Specific Academic: Math	Specific Academic: Science
Specific Academic: Social Studies	Visual & Performing Arts: Art	Visual & Performing Arts: Dance
Visual & Performing Arts: Drama	Visual & Performing Arts: Music	

Service Delivery Plan

Services to ensure continuous progress for this student may include the following:

Various Acceleration Options

- Early Exit from Primary
- Dual Enrollment Courses
- Grade Skipping
- Dual Credit Courses
- Subject Area Higher Grade Level
- Early Exit from High School

Differentiated Study Experiences in the Classroom

- Differentiated Individual Study
- Differentiated for Cluster Groups

Distance Learning

- KVHS Courses
- Video Courses
- Other Online Courses

Resource Services

- Pull-out setting
- Appropriate Instructional Setting
- Consortium

Other Considerations

Collaborative Teaching and Consultation Services	Special Counseling Services
Enrichment Services (School Day)	Independent Study
Mentorships	Seminars
Travel Study Options	Special Schools (4-12)
Self-Contained Classrooms	

Evidence: A minimum of three must be selected

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|--|---|
| Anecdotal Records | Behavioral Checklist |
| Checklist Inventories (Underachieving/Disadvantaged) | Collection of Evidence from Portfolios |
| Continuous Progress Data | High Performance on Assessment |
| Informal Assessment | Nominations-Peer |
| Nominations-Self or Petition | Observation of Applied Advanced Reasoning |
| Primary Review Committee Recommendation | Referrals/Recommendation-Parent |
| Referrals/Recommendation-Teacher | Student Awards or Critiques |
| 9th Stanine on Assessment | Auditions |
| Portfolio of Student Work | Questionnaire |
| other | |

If other please specify:

Goals: In the area(s) of giftedness

1. Student demonstrates achievement in process skills.
2. Student completes high quality products/performances.

Additional goal:

Additional goal:

Parent/Guardian will be notified of gifted progress report once a semester for his/her child related to this Gifted Student Services Plan.

Parent Signature: _____ Date: _____

Teacher(s) Signature(s): _____ Date: _____

_____ Date: _____

Principal or Designee Signature: _____ Date: _____

If you would like to discuss this plan in greater detail, or you have questions regarding your child's Gifted Student Services Plan, please contact:

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