**Baconton Community Charter School**

**Gifted Program**

**Administrative Procedures Manual**

**May, 2019**

### **MISSION STATEMENT**

It is the mission of BCCS to provide a safe, nurturing environment for a diverse community of learners to develop academic potential and ethical character leading to productive citizenship in the 21st century.

**BCCS Vision**:

* All students can become confident, lifelong learners.
* Students should be actively involved in the learning process.
* Teachers, administrators, parents, students and the community share the responsibility for providing a supportive learning environment.
* Our school should utilize current technology to prepare students for the future.
* Because our students are diverse and learn in different ways, instructional practices should incorporate a variety of learning activities and provide opportunities beyond the regular curriculum.
* Students should understand the relationship of what they learn to the world around them.
* Students deserve a safe, orderly, and positive environment in which to learn.
* Our school should provide experiences which promote social and emotional development.
* Our school should increase students’ involvement with the fine arts.
* To provide our student with the appropriate curriculum and learning experiences, our school should continue its commitment to their improvement.

**GIFTED PROGRAM**

### **DEFINITIONS**

BCCS defines a **gifted student** as:

a student who demonstrates a high degree of intellectual, creative, and/or artistic ability(ies), exhibits an exceptionally high degree of motivation, and/or excels in specific academic fields and who needs special instruction and/or special ancillary services to achieve at levels commensurate with his or her abilities.

Georgia Board of Education (GBOE) Rule 160-4-2-.38

A **differentiated curriculum**, as defined by the Georgia Board of Education, is comprised of courses of study in which the content, teaching strategies, and expectations of student mastery have been appropriately modified for gifted students.

Referrals are reviewed at K-8 by the Gifted Teacher. Personnel review assessment data to determine continued eligibility and design Plans of Improvement for gifted students who are not performing satisfactorily in the regular classroom or in the gifted class.

An **Eligibility Team** reviews referrals, reviews assessment data to determine eligibility, and designs Plans of Improvement for gifted students who are not performing satisfactorily in the regular classroom or in the gifted class.

* K-8 Eligibility Team: Principal or Assistant Principal and Gifted Teacher

**Primary and Elementary**

The goal of the K-5 gifted program is to enable students to become self-directed learners who will naturally employ thinking, research, communication, and learning skills. The gifted specialists provide opportunities for students to master clearly defined state and local goals through a daily scheduled resource class, collaborative, and/or cluster grouping. The program emphasizes the process of learning as well as content. Critical and creative thinking skills are addressed daily. Multiple subjects are integrated into areas of study at the appropriate level of abstractness and complexity. The content is differentiated in ways that allow the students to construct a bridge between different fields of knowledge. The gifted specialists will provide a rigorous learning environment allowing students to pursue topics based on their strengths and interests.

**Middle School**

The responsibility of the BCCS Gifted Program is to expand the knowledge of the individual, to challenge the mind to think beyond the concrete level into the abstract, and to promote individuality as well as intellectual and creative thinking. Gifted students at the middle school are served through academic classes.

 Academic classes may include any of the five disciplines: social studies, reading, science, English and mathematics. Students are placed in academic classes utilizing the Advanced Content model. These students are grouped homogeneously on the basis of achievement and interest in a specific academic content area of mathematics and reading. Other students are served via the clustering model. Curriculum modifications are made for gifted students in a heterogeneous regular classroom.

**PROGRAM GOALS**

The goal of the BCCS Gifted Program is to provide students with the opportunity to enhance cognitive skills, learning skills, research and communication skills by extending learning experiences beyond the regular classroom. Students will be served utilizing the SBOE approved delivery models as defined in the Resource Manual for Gifted Education Services.

Additionally, careful attention will be paid to equity issues such as the number of nominations and/or referrals of minority students and the proportion of referrals for both genders. Program evaluation results will guide the development of the needed staff development and/or procedural modifications.

Gifted students demonstrate characteristics that generally differentiate gifted learners from more typical learners – they learn at faster rates, their capacity to find, solve, and act on problems, their ability to manipulate abstract ideas and make connections. In developing performances and products, students have the opportunity to make choices and decisions that incorporate reading, math, science, social studies, communication, and technology skills.

**Gifted Education Services Information**

Stakeholders in BCCS are given information on the gifted services via the system web page and through the school’s student handbook.

**PROGRAM STRUCTURE**

#### **Eligibility**

Current Georgia Board of Education Rules and Regulations for Gifted Programs permit school systems to identify students for gifted education services using the multiple criteria rule, GBOE Rule 160-4-2-.38. Students are determined to be eligible for gifted education under this rule.

#### **REFERRAL PROCEDURES**

The Gifted Education Referral Process Flowchart indicates the steps that occur in the process from the referral phase to placement of a student in the program for gifted students and the subsequent annual review that occurs each school year.

The referral process has five basic steps:

1. referral of students as possible candidates for formal evaluation (any time of the year),
2. review of referrals and available data to determine if the referral for formal assessment is warranted (any time during year),
3. collection of data and assessment of referred students (fall for “new to BCCS, spring of year for others),
4. examination by the Eligibility Team or Gifted Teacher/Counselor of assessment data for determination of eligibility, and
5. placement in the gifted program, or if found ineligible, curriculum adaptations in the regular education program as may be necessary and determined by assessment dat
6. **Student Referral**

The purpose of the referral phase is to gather existing information about the student, including observation of student behaviors, in order for the Eligibility Team to determine whether further consideration for the gifted program is warranted. Any person who has knowledge of a student’s intellectual functioning can make a referral. A referral may be made by teachers, counselors, administrators, parents or guardians, student peers, or by the student himself/herself.

**Reported Referral**

Persons wishing to refer a student will complete a Gifted Program Referral Form. Teachers will provide student summary information from the student information system and complete the required paperwork. Gifted Program Referral forms as well as other

paperwork are to be turned in to the gifted education teacher. Referrals may be turned in any time during the school year but will be reviewed by the local school Eligibility Team shortly after school opens in the fall for new BCCS students and in the Spring for all other students.

Students who move to BCCS that were actively engaged in a gifted program in another Georgia public school district will be placed in the gifted program at BCCS once documentation of service in the former Georgia school district has been received. Students who move to BCCS that were actively engaged in a gifted program in a public school district outside the State of Georgia will be reviewed by the local school Eligibility Team to determine if any assessment is necessary before determining eligibility for gifted program services. Students entering prior to the Fall testing window in late September are assessed using Georgia criteria. Students new to BCCS entering after the Fall testing window, will be assessed during the Spring testing window (February/March).

**Automatic Referral**

A student is automatically referred if the student has some qualifying scores or significant scores from the previous two years of testing warranting further assessment.

#### **Review of Referrals**

Please note: Referral does not mean evaluate. If evidence does not support evaluating, then do not.

The Gifted Eligibility Team will meet according to a site-based schedule to review referral information. This information should include the TABs referral form, Classroom Gifted Checklist, products/projects completed by the student, and any other supporting documentation.

As each student’s information is reviewed, the team will make one of the following decisions regarding each referred student:

1. The student information collected thus far does not warrant a recommendation to continue the referral.

OR

2. The student will be referred for further assessment and data collection.

**Grades K-8**: Once a decision has been made for further assessment, the team will notify the parents or guardians in writing. The form, Parent Nomination for Consideration/Consent for Evaluation for the Program for the Gifted is used for this purpose. Parental consent to evaluate must be obtained before further assessment occurs.

**Assessment of Referred Students**

Assessment of students referred for gifted services will be conducted at two separate times during a school year – first grading period for students new to BCCS and in the spring for students referred during the school year.

When the Eligibility Team refers a student for further assessment, the gifted education teacher will administer appropriate tests and/or gather necessary data in all four categories of eligibility. This process can vary from student to student depending primarily on grade level and assessment data already available. More testing may be needed for some students than for others based on available and current data.

* The **Cognitive Abilities Test (CogAT**) will be used in K-12 to measure mental ability.

* For the category of achievement, a norm-referenced test such as the **MAP Growth Assessment** will be administered.

* An instrument which measures creative thinking, such as the **Torrance Test of Creative Thinking (TTCT)**, will be used to assess eligibility in the creativity category at all grade levels.

* For the category of motivation, assessment instruments that may be used include: the **Gifted Rating Scale (GRS/GRP)** Grades K-5.

* For the category of motivation in 6-8, students must have a grade point average (GPA) of at least 3.5 on a 4.0 scale where a 4.0 = A and 3.0 = B, or a numeric grade point average (NGA) of 90 percent on a 100 point scale where 100 = A and a 89 = B. Grades used to determine the GPA or NGA must be a two-year average of regular school program core subject grades in mathematics, English/language arts, social studies, and science.

**Determination of Eligibility**

After data has been collected in all four eligibility categories, the Eligibility Team will carefully review all data to determine if sufficient information is available to make an eligibility decision. In keeping with GBOE Rule 160-4-2-.38, a student must meet eligibility criteria in one of two ways: a) score at the 99th percentile (for grades K-2) or the 96th percentile (for grades 3-8) on the composite or full scale score of a standardized test of mental ability and meet one of the achievement criteria, **or** b) qualify through a multiple-criteria assessment process by meeting criteria in any three of the four categories: mental ability, achievement, creativity and motivation. Any students test scores that are less than two years old can be considered for qualifying for gifted services.

**Ineligible Students**

If students do not meet eligibility criteria as per GBOE Rule 160-4-2.38, students at grades K-8 will be eligible for re-screening in subsequent years. If scores are older than two years, then the student will be re-screened in that particular area.

**Use of Outside Data**

Assessment data gathered and analyzed by a source outside the student’s school or school system must be considered as part of the referral and evaluation process. However, these outside data shall not be substituted for data the school generates during the testing/evaluation process and may never be the sole source of assessment data. The system shall never rely on this data exclusively for determination of eligibility for gifted program services. Outside test data ***may be used*** as part of a comprehensive profile of test and non-test evidence of advanced instructional needs.

**Placement in Gifted Program**

Based upon the data collected, the Eligibility Team will make one of the following decisions:

* The student is eligible for gifted program services under the criteria established under Rule 160-4-2-.38.

OR

* The student is not eligible for gifted program services because he/she has not met the criteria established by Rule 160-4-2-.38.

An Eligibility Report Form must be completed and a copy given or sent to the parent(s) or guardian(s) for both eligible and ineligible students. A letter accompanies the Eligibility Report. If the student is eligible, consent for placement must be obtained prior to the student receiving gifted education services. Eligibility Report information is included in the school system student information database.

Students can begin receiving gifted education services at one of two times during the school year. For primary, elementary and middle school students, new placements can occur at the beginning of the school year or at the completion of the assessment process scheduled at the beginning of the school year.

**Reciprocity**

* Students transferring from out of state will need to be considered on an individual basis by the Eligibility Team and a determination made regarding whether sufficient information exists to establish eligibility based on state and local criteria or whether further testing is needed. Transfer students must meet continuation policy criteria established for BCCS in order to continue receiving gifted education services.
* Students who have been in a gifted program in another county in Georgia will automatically begin receiving gifted education services at BCCS as soon as documentation of placement in the former school district is confirmed and parent permission is received.

**Curriculum Adaptations for Ineligible Students**

When a student is found to be ineligible for gifted program services, opportunities are available for differentiation of instruction and further screening/assessment for the Gifted Education Program. Reviews of student testing data and achievement occur on a regular basis, typically one to two years of an initial screening.

**Annual Review**

The progress of each student receiving gifted education services shall be reviewed annually. Students performing satisfactorily in gifted education classes shall continue receiving gifted education services. The Continuation Policy for gifted education is part of this Administrative Procedures packet. Parent(s) or guardian(s) will be given a copy of the Annual Review and Program Description.

**Continuation Policy/Procedure**

Any student who receives gifted education services shall continue to receive services, provided the student demonstrates satisfactory performance in gifted education classes

Satisfactory performance shall be based on the student maintaining passing

* at K-5 in the gifted resource class
* gifted academic subjects at 6-8 with an overall 3.0 average for the grading period.

Should a student fail to maintain satisfactory performance in the gifted classroom, a Plan of Improvement will be developed for primary and elementary students, while a conference will be held with the middle/high school students. This plan/conference will identify specific student goals that should lead to satisfactory performance once again. Parent/guardians of primary/elementary students will receive a letter requesting a conference and a copy of the Plan of Improvement while the middle school/high school parents will receive the Notification of Placement Review letter that includes notification of the probationary period. The probationary period will be a minimum of one grading period for students at all instructional levels. At the completion of the probationary period, the Plan of Improvement/Placement Review will be reviewed. Students who meet the terms of the Plan of Improvement/Placement Review will continue to receive gifted education services. Students who do not meet the terms of the Plan of Improvement/Placement Review will no longer receive gifted education services.

Parents/guardians will receive written notification following the Eligibility Team meeting when the Plan of Improvement/Placement Review information is reviewed.

Parents who wish to schedule a conference concerning the student’s continuation or exit from the program may do so**.**

**Grading period = one semester for middle school students; 9 weeks at primary and elementary level.**

**Withdrawal from Gifted Education Services**

A student shall not be withdrawn from the Program for the Gifted without written notification to the parent/guardian and offered the option of a conference. A student may be dismissed from the gifted education program by:

1. not meeting the terms of a Plan of Improvement,

2. parent request,

3. withdrawal from school (i.e., - moved),

4. graduation, or

5. the student’s death

If for some reason a parent/guardian wishes voluntarily to withdraw their child from receiving gifted education services, they should inform the gifted education teacher in the local school. A conference will be scheduled to discuss the nature of the parental concern(s). The parents/guardians, a classroom teacher, a gifted education teacher, and an administrator will be invited to attend this conference. A withdrawal form should be completed to formally withdraw a student.

**Re-entry**

If a student has withdrawn from the gifted program for any reason other than moving from the county, and is considered for re-entry at a later time, the student will not be able to re-enter until the beginning of the next school year following the expiration of one calendar year. A student who was dismissed from the program following the development of a Plan of Improvement/Placement Review must meet the goals of the Plan of Improvement/Placement Review that were in place at the time of dismissal from the program. A student who exited the gifted program at the request of the parent/guardian must meet the eligibility criteria in place at the time of re-entry. It is the responsibility of the parent(s) or guardian(s) to request permission for the student to be considered for reinstatement into the program. This makes it possible for placement decisions to be made in time for planning for the next school year. Following the parents’/guardians’/ request, the school’s Eligibility Team will review the student’s gifted education file to make a decision regarding re-entry into the gifted program. For a student to re-enter the gifted program, an ***Eligibility-Placement form*** (create form) will be completed reflecting the change in the student’s educational plan. Parents/guardians will receive written notification of the Eligibility Team’s recommendation and will be offered the opportunity for a conference.

If a student is dismissed from the gifted program after a probationary period, the student must meet eligibility requirements to resume gifted education services.

 **Eligibility Criteria Summary**

To be eligible for gifted education services, a student must either (a) score at the 99th percentile (for grades K-2) or the 96th percentile (for grades 3-8) on the composite or full scale score of a norm-referenced test of mental ability and meet one of the achievement criteria or (b) qualify through a multiple-criteria assessment process by meeting the criteria in any three of the following four areas: mental ability, achievement, creativity, and motivation. These criteria are in accordance with Rule 160-4-2-.38 of the Georgia Board of Education. Students are assessed in the categories of: mental ability, achievement, creativity, and motivation. Assessment data for any of the four categories must be no more than two years old. Standardized tests that are used must be nationally normed***. BCCS may use the following instruments or any other assessment measure that meets state criteria when determining program eligibility.***

|  |  |  |  |
| --- | --- | --- | --- |
| **Categories** | **Assessment Instruments** | **Grade Level** | **Criteria** |
| Mental Abilities | Cognitive Abilities Test (CogAT)Verbal ComponentQuantitative ComponentNon-verbal ComponentComposite (V+Q+NV)***Any component score or composite score*** |  |  (1) Psychometric Composite Score must=99th percentile (K-2) or>96th percentile (3-12)(2) Multiple Criteria*>*96th percentile K-12  |
| Achievement | Norm-Referenced TestMAP GrowthTotal ReadingTotal Math Total CompositeAny of the 3 | K-8 | (1) Psychometric Score*>90th percentile for any component score*(2) Multiple Criteria*>*90th percentile K-12*for any component score* |
| Creativity | Torrance Test of Creative ThinkingFigural or Verbal | K-8 | (2) Multiple Criteria>90th percentile |
| Motivation | Gifted Rating Scale Grade Point Average(1st sem or 3rd 9 weeks) | K-5 6-8  | (2) Multiple Criteria>90th percentileat least ≥3.5  |

**Initial Eligibility**

To be eligible for gifted education services, a student must either:

a. score at the 99th percentile (K-2) or ≥ 96th percentile (3-8) on the composite or full scale score of a standardized test of mental ability **and** meet one of the achievement criteria

OR

b. qualify through a multiple-criteria assessment process by meeting the criteria in any three of the following four areas: mental ability (intelligence), achievement, creativity and motivation.

Georgia Board of Education Rule 160-4-2-.3

**CURRICULUM and SERVICES to be PROVIDED**

**Instructional Services-Materials**

The mission of the Program for the Gifted of BCCS is to provide for the extension of learning opportunities, development of individual potential, enhancement of the student’s self-concept and advancement toward becoming an independent learner beyond the opportunities and experiences of the regular classroom. The program will provide differentiated curricula offerings based on the assessed needs of the student while meeting GPS objectives and the state gifted standards. The curricula will focus on developing cognitive, learning, research and reference, and meta-cognitive skills at each grade level.

**Differentiated Curricula**

Students receiving gifted education services while in primary and elementary school have *curriculum enrichment activities* that incorporate the four academic disciplines of: mathematics, language arts, social studies, and science.

At the middle school, academic classes may include any of the five disciplines: social studies, reading, science, language arts, and math. The course syllabus and academic content in each of these courses is differentiated in that it is faster paced and is more rigorous and challenging than what is found in a regular class at the same grade level.

**All gifted identified students are served at a minimum of 5 segments a week.**

**Gifted Education Continuation Policy**

According to Georgia Department of Education, Gifted Program Regulations and Procedures, the performance of students receiving gifted education services will be evaluated annually. This will include evaluation of performance in the gifted resource classroom at the K-5 level and the gifted academic classes at the 6-8 level. When a student’s performance is deemed unsatisfactory in the gifted education classroom, a referral shall be made.

At the primary/elementary level, intervention strategies will be used over a prescribed period of time by the classroom teacher and/or the gifted education teacher. Following the prescribed period of time, there will be a review of the student’s progress. If the problem(s) persists, a meeting will be scheduled for the purpose of designing a Plan of Improvement for a prescribed period of time determined by the Eligibility Team. During this time, the student’s placement for receiving gifted education services is in jeopardy and the student is on probation. The Plan of Improvement describes the goals that must be met in order for the student to continue to receive gifted education services. The student continues to receive gifted education services during the probationary period. At the conclusion of the probationary period, the Eligibility Team reviews the goals of the Plan of Improvement. If the student has been able to meet the prescribed goals, placement in the gifted education program will continue; if the goals are not met, gifted education services will be discontinued.

At middle school, satisfactory performance in gifted courses shall be based on the student maintaining a 3.0 average for the grading period. Teachers will conference with students when student performance is deemed unsatisfactory. Students will be placed on probation for one entire grading period. At the end of the probationary period, the students’ status regarding the continuation criteria will be reviewed.

Parents of students whose performance is deemed satisfactory will be notified of the Eligibility Team’s recommendation for continuation in the gifted program.

**Suggestions to use when Designing a Plan of Improvement\*\***

The gifted education teacher should document carefully the unsatisfactory performance of identified gifted students in the gifted education class. This documentation should be for a **minimum** of nine weeks and should be used when discussing and designing intervention for the student. Some things that may be considered when designing a Plan of Improvement are:

**For the unstructured student:**

Set up a schedule that will help the student develop organization skills; break assignments down into smaller pieces; let the student know what is expected of him/her.

**For the student with social and/or emotional problems:**

Set up a counseling program with the school counselor.

**For the student who begins to make poor grades:**

Prescribe specific study skills; formal or informal diagnostic evaluation may also be needed.

**For the unmotivated student or poor academic performer:**

Determine whether the curriculum being offered is sufficiently challenging or appropriate for the gifted student; formal or informal diagnostic tests may need to be administered.

**For the student who does not turn in required assignments:**

Determine whether required assignments are necessary for the student to demonstrate mastery of the objectives; may need to set up a plan for modifying the standard curriculum assignments to permit the student opportunity to demonstrate mastery of the standard curriculum objectives; work with the student to set up realistic workload expectations; determine if program placement is appropriate.

These are only suggested ideas. In some cases, standardized testing may need to be done or the most recent test results considered when determining program continuation. Students should not be dismissed from the gifted program for having a poor grade point average. An unsatisfactory grade point average is an indication of a problem-not the problem. The Gifted Eligibility Team should look at specific subject matter grades that may be in question. The Plan of Improvement should be targeted toward skills and/or behaviors that will result in improved performance in that subject area(s).

The individual needs of the student and available resources should all be considered when the Eligibility Team is designing the Plan of Improvement.

**When possible, the student may be included when designing the Plan of Improvement.**

**\*\*** Primary/Elementary Schools only

**Forms and Letters to be used for Gifted Screening and Assessment**

**Baconton Community Charter School**

**Advanced Academic Program/Gifted Education**

**ELIGIBILITY REPORT**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** |  | **Student GTID Number** |  |
| **Date of Birth** |  | **Current Grade**  |  | **School**  |  | **Date**  |  |

**The student must meet criteria in either Procedure 1 or Procedure 2 to be eligible.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Assessment Instruments** | Date Given | Score %ile | Procedure 1 – Mental Ability & Achievement Criteria Required (Psychometric) | Procedure 2 – Multiple Criteria3 or 4 categories |
| **MENTAL ABILITY** | **Cognitive Ability Test** |  |  | *Requirements*Composite Total K-2 ≥ 99%ile3-12 ≥ 96%ile | *Criteria Met***Yes No** | *Requirements*Composite orComponentTotalK-12 ≥ 96%ile | *Criteria Met***Yes No** |
|  Verbal |  |
|  Quantitative |  |
|  Nonverbal |  |
|  Composite |  |
| Other test(s): |  |  | **Yes No** |  | **Yes No** |
| **ACHIEVEMENT** | **Norm-Referenced Test: MAP Growth** |  |  | *Requirements*Total ReadingorTotal MathorCompositeK-12 ≥ 90%ile | *Criteria Met***Yes No** | *Requirements*Total ReadingorTotal MathorCompositeK-12 ≥ 90%ile | *Criteria Met***Yes No** |
|  Total Reading |  |
| Total Math |  |
| Composite |  |
| Other test(s): |  |
| **CREATIVITY** | **TTCT - Figural** |  |  |  | *Requirements*≥ 90%ile | *Criteria Met***Yes No** |
| *Product/Performance* |  |  | ≥ 90%ile |  |
| **MOTIVATION** | **Motivation** |  |  |  | *Requirements* | *Criteria Met* |
| Gifted Rating Scale(K-5) |  |  | ≥ 90%ile | **Yes No** |
| Grade Point Average (6-8) |  |  | At least ≥ 3.5 |  |
| Grade Point Average (9-12) |  |  | At least ≥ 3.5 |  |
| Product/Performance (K-12) |  |  | At least ≥ 3.5 |  |

Rule: 160-4-20-.38

**\_\_\_ Student is ineligible**

**\_\_\_ Student is eligible for placement**

**Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_**

**Baconton Community Charter School**

**ADVANCED ACADEMIC PROGRAMS/GIFTED PROGRAM**

**PERMISSION TO TEST**

Date \_\_\_\_\_\_\_\_\_\_\_\_\_

Dear Parent/Guardian:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** has been referred for educational screening for the gifted program. The assessment process will allow school personnel to determine eligibility for educational programming to better meet your child academically. For students in grades K-8, the MAP Growth assessment will be administered to determine the need for additional assessment. Students who score ≥90th percentile will be recommended for further testing to determine eligibility.

Eligibility assessments may include CogAT for the area of mental abilities, MAP test for the area of achievement, Torrance Tests of Creative Thinking (TTCT) for the area of creativity, and the Gifted Rating Scale (GRS) for the area motivation. The Gifted Teacher can answer questions concerning the nature and process of the assessment. The time needed to complete the assessment is dependent upon a number of factors including, but not limited to, the number of tests required, established district-wide testing windows, etc.

You will be notified regarding the outcome of the evaluation when all assessments are complete. A conference can be scheduled at parents’/guardians’ request to discuss his/her scores and potential educational program.

You will be notified regarding the outcome of the evaluation when all assessments are complete.

**Please check the appropriate permission statement below, providing the parent/guardian signature and return to the child’s teacher as soon as possible.**

|  |  |
| --- | --- |
|  | Yes, BCCS personnel have permission to test my child as indicated above.  |
|  |  |
|  | No, BCCS personnel do not have permission to test my child. |
|  |  |
|  |  |
| **Comments:** |  |
|  |
|  |
|  |
| Signature, Parent/Guardian |  | Date |
|  |
| Gifted Chairperson |  | Date |

**Baconton Community Charter School**

**Advanced Academic Programs/Gifted Education**

**POST-SCREENING NOTIFICATION**

 Date \_\_\_\_\_\_\_\_\_\_\_

Dear Parent/Guardian:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** was referred for the BCCS Advanced Academic/Gifted Education Program. Screening results indicate that your child does not meet the requirements of the comprehensive screening process. The result of the MAP Growth Assessment is recorded at the bottom of this letter.

All procedures and assessments follow the Georgia Department of Education guidelines as directed through the State Board of Education Rule 160-4-2-.38, Education Program for Gifted Students.

As your child progresses through the upcoming grade levels, opportunities are available for differentiation of instruction and further screening/assessment for the Gifted Education Program. Reviews of student testing data and achievement occur on a regular basis, typically one to two years of an initial screening. Please encourage your child to continue the excellent academic achievement. If you would like to discuss the results of this evaluation, please contact me at the phone number listed below.

Sincerely,

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Gifted Education Eligibility Team Representative

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Your child needed a 90% or greater on the MAP to continue the evaluation process. Your child’s score was \_\_\_\_\_ **%.**

**Baconton Community Charter School**

**Advanced Academic Programs/Gifted Program**

**CONTINUE TO EVALUATE NOTIFICATION**

Date \_\_\_\_\_\_\_\_\_\_\_\_

Dear Parent/ Guardian:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** was referred for the BCCS Advanced Academic/Gifted Education Program. Screening results indicate that your child does meet the requirements of the comprehensive screening process. The result of the MAP Growth assessment is recorded at the bottom of this letter.

All procedures and assessments follow the Georgia Department of Education guidelines as directed through the State Board of Education Rule 160-4-2-.38, Education for Gifted Students.

Eligibility assessments may include CogAT for the area of mental abilities, MAP test for the area of achievement, Torrance Tests of Creative Thinking (TTCT) for the area of creativity, and the Gifted Rating Scale (GRS) for the area motivation. The time needed to complete the assessments are dependent upon a number of factors including, but not limited to, the number of tests required, established district-wide testing windows, etc. Parents will be notified of student results in May.

Sincerely,

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Gifted Education Eligibility Team Representative

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Your child needed a 90% or greater on the MAP to continue the evaluation process. Your child’s score was \_\_\_\_\_ **%.**

**Baconton Community Charter School**

**Advanced Academic Programs/Gifted Education**

**POST-EVALUATION NOTIFICATION**

Date \_\_\_\_\_\_\_\_\_\_\_

Dear Parent/Guardian:

Recently your child, **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**, was referred for the BCCS Advanced Academic/Gifted Education Program. At this time, your child does not meet the rigorous requirements of the comprehensive screening and assessment for placement in the Gifted Education Program.

All procedures and assessments follow the Georgia Department of Education guidelines as directed through the State Board of Education Rule 160-4-2-.38, Education Program for Gifted Students. Your child’s results and program requirements are indicated on the attached copy of the Eligibility Report.

As your child progresses through the upcoming grade levels, opportunities are available for differentiation of instruction and further screening/assessment for the Gifted Education Program. Reviews of student testing data and achievement occur on a regular basis, typically one to two years of an initial screening. Please encourage your child to continue the excellent academic achievement that contributed to the original referral for consideration to the Gifted Education Program. If you would like to discuss the results of this evaluation, please contact me at the phone number listed below.

Sincerely,

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Gifted Education Eligibility Team Representative

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Baconton Community Charter School**

**ADVANCED ACADEMIC PROGRAMS/GIFTED PROGRAM**

**POST-EVALUATION NOTIFICATION**

Date \_\_\_\_\_\_\_\_\_\_\_

Dear Parent/Guardian:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** has been determined to be eligible forplacement in the gifted program.

Your child’s progress in the gifted program will be reviewed annually. You will be informed in writing should your child’s placement in the program be in jeopardy.

Please indicate below your decision concerning placement in the gifted program by signing and returning this form to your child’s teacher.

Your child will begin receiving gifted education services for the \_\_\_\_\_\_\_\_\_\_\_\_ school year. If you have questions regarding the program, please do not hesitate to call me.

Sincerely,

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Gifted Education Eligibility Team Representative

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check One:

|  |  |
| --- | --- |
|  | I agree with the gifted placement. |
|  | I do not agree with the gifted placement. |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Parent Signature |  | Date |

**Baconton Community Charter School**

**ADVANCED ACADEMIC PROGRAMS/GIFTED PROGRAM**

**RECIPROCITY NOTIFICATION**

Date \_\_\_\_\_\_\_\_\_\_\_\_

Dear Parent/Guardian:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** has been determined to be eligible for placement in the gifted program at BCCS. Records indicate your child was enrolled in a gifted program in the state of Georgia; therefore, reciprocity qualifies the student for placement.

Your child’s progress in the gifted program will be reviewed annually. You will be informed in writing should your child’s placement in the program be in jeopardy.

Please indicate below your decision concerning placement in the gifted program by signing and returning this form to your child’s teacher.

A time will be scheduled for your child to begin receiving gifted education services as soon as the enclosed form is returned. If you have questions regarding the program, please do not hesitate to contact me.

Sincerely,

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Gifted Education Eligibility Team Representative

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check One:

|  |  |
| --- | --- |
|  | I agree with the gifted placement. |
|  | I do not agree with the gifted placement. |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Parent Signature |  | Date |

**Baconton Community Charter School**

**Advanced Academic Programs/Gifted Education**

**WITHDRAWAL FORM**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ Student Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Dear Parent/Guardian:

Your child has been withdrawn from the gifted program for the following reason:

\_\_\_\_ Parent request

 Reason for request for withdrawal:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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\_\_\_\_ Following an academic probationary period, your child’s performance falls below the BCCS approved continuation policy criteria for Advanced Academic

 Programs/ Gifted Education Services.

Your child does not meet the acceptable criteria and will be withdrawn in the following area(s):

\_\_\_\_ Primary/Elementary Gifted Resource Classroom average is unsatisfactory for 9 weeks.

\_\_\_\_ Middle or high school gifted class average is below 70% for the semester.

 Subject area/class: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you would like to request a review of your child’s continuation criteria, please contact the Eligibility Team Representative below.

Re-entry may not be considered until the beginning of the next school year following the expiration of a full calendar year. Your child may be reinstated as eligible for Advanced Academic Programs/Gifted Education services when evidence of satisfactory academic performance is submitted to the school’s Gifted Eligibility Team for consideration. Parents must initiate re-entry.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Gifted Education Eligibility Team Representative

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature Date

**Baconton Community Charter School**

**Advanced Academic Programs/Gifted Education**

**ANNUAL REVIEW AND PROGRAM DESCRIPTION**

**School Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| **Student Name:**  | **Birthdate:** |
| **School:**  | **Current Grade:**  |
| **Teacher:**  | **Date:**  |

**Primary Delivery Model(s)/Program Description for Current Year:**

 Elementary: \_\_\_ Resource Enrichment Class \_\_\_ Cluster Grouping

 Middle School: \_\_\_ Advanced Content Model \_\_\_ Cluster Grouping

**Total Segments per Week:** \_\_\_\_

Integrated Curriculum which focuses on National Gifted Standards and Georgia Standards of Excellence (GSE). Rigorous formative and summative assessments will be used.

**Status: (Annual Review)**

**Active**  **Inactive**

\_\_\_\_ New to Program \_\_\_\_ Withdraw from Program

\_\_\_\_ Continue Program (Student/Parent Request)

\_\_\_\_ Probation In good standing: Yes No

 \_\_\_\_ Ineligible (grades)

Re-enter Program Date:\_\_\_\_\_\_\_

**Curriculum Focus for next year:**

\_\_\_\_ Language Arts \_\_\_\_ Science

\_\_\_\_ Math \_\_\_\_ Social Studies \_\_\_\_ Resource Enrichment Class

\_\_\_\_ Reading

**Comments:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Baconton Community Charter School**

**Advanced Academic Programs/Gifted Education**

**NOTIFICATION OF PROBATION**

**Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_

Dear Parent/Guardian:

As you were made aware when your child entered Advanced Academic programs/Gifted Education, the BCCS Board-Approved Gifted Education Continuation Policy stipulated that each student must maintain satisfactory performance to remain in the program.

Enclosed for your information are the Steps for Review of Gifted Services.

According to the most recent report card, your child does not meet the acceptable criteria and is therefore placed on probationary status for this semester in the following area (s):

\_\_\_\_ Primary/Elementary Gifted resource Classroom average is unsatisfactory for a grading

period.

\_\_\_\_ Middle or high school gifted class average is below 70% for the semester.

 Subject area/class: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you would like to request a review of your child’s continuation criteria, please contact the Eligibility Team Representative below.

Your child will continue to receive Advanced Academic Program/Gifted Education service during this probationary period. An Individual Academic Plan outlining the provision of appropriate interventions will be developed and monitored by teachers serving your child. Your child’s progress and performance will be reviewed at the end of the grading period. If the report card grades meet acceptable criteria, your child will return to full active status.

If you have any questions or concerns, please contact me at school.

|  |
| --- |
| Thank you,**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

Gifted Education Eligibility Team Representative

**PLEASE SIGN AND RETURN**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature Date

**Baconton Community Charter School**

**Advanced Academic Programs/Gifted Education**

**Referral to Student Support Team/Gifted Eligibility Team**

**Individual Academic Plan**

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Meeting Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Reason for Referral:** Probation Performance Concerns Attendance Other

Probation Class(es): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Probation Period: Start Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Review Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

**INDIVIDUAL ACADEMIC PLAN**  Date IAP Implemented \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date IAP Concluded \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Interventions: Provided by:**

**1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student Responsibilities:**

**1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Status:** Return to good standing Continue probationary placement

 Withdraw from program In good standing: YES NO

 (student/parent request)

**Team Members:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

Signature, Parent/Guardian Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

Signature, Team Chairperson Date

**Baconton Community Charter School**

**Advanced Academic Programs/Gifted Education**

**CONTINUATION LETTER**

**Date:** \_\_\_\_\_\_\_\_\_\_\_

**Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dear Parent/Guardian:

The Gifted Eligibility Team has met to evaluate the Plan of Improvement/Program Review that was designed following review of your child’s performance in school to determine continuation in, or dismissal from, the gifted education program. Based upon the evaluation of your child’s performance on the Plan of Improvement/Program Review, the Eligibility Team is happy to recommend **continuation** in the gifted program. We hope the problem(s) that existed before has been corrected, and we can expect continued satisfactory performance.

Thank you for your cooperation in helping to make this a worthwhile learning experience.

|  |
| --- |
| Sincerely,**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

Resource Classroom Teacher/Gifted Chairperson

**PLEASE SIGN AND RETURN**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature Date