**San Luis Valley BOCES Gifted and Talented Identification Referral & Review**

**Area of Giftedness: Specific Talent Aptitude**

Visual Arts Performing Arts Music Dance Psychomotor Creativity  Leadership

Student name: Click here to enter text. ID: Click here to enter text. DOB: Click here to enter a date.

Age Click here to enter text. Grade: Click here to enter text. Student is among text.

Current school: Click here to enter text. Previous schools: Click here to enter text.

Referral initiated by (name & relationship to student) Click here to enter text. Date enter a date.

**Identify the qualifying evidence below.**

Evidence below must include information in all three evidence areas OR (if no criterion/norm-referenced tests are available) at least two performance evaluations and a norm-referenced observation scale.

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| --- | --- | --- | --- | --- |
| **Evidence Area 3** | | | | |
| **Criterion- or Norm-referenced Test** | | | | |
| ≥95%ile on Profile of Creative Abilities | | | | |
| Subtest | | Date | | Score |
|  | |  | |  |
|  | |  | |  |
|  | |  | |  |
| ≥95%ile on Cognitive Test | | | | |
| Test | Area | | Date | Score |
|  |  | |  |  |
|  |  | |  |  |
| Advanced on CDE Resource Bank Assessment (attach rubric) | | | | |
| Area | Test | | Date | Rubric score |
|  |  | |  |  |
|  |  | |  |  |

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| --- |
| **Evidence Area 1** |
| **Performance Evaluation**  (provide description of performance and who judged/reviewed along with their qualifications in **narrative**) |
| Top Place or Ranking in State or National Contest |
| Advanced or Distinguished in Expert Juried Performance |
| Portfolio Reviewed by Qualified People/Team and scored Advanced/Distinguished |

|  |  |  |  |
| --- | --- | --- | --- |
| **Evidence Area 2** | | | |
| **Norm-referenced**  **Observation Scale** | | | |
| ≥95%ile on GES and/or  SIGS. “H” for Home; “S” for School. | | | |
| Test & H or S | Area | Date | %ile |
|  |  |  |  |
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**Provide interpretive and descriptive information (characteristics, behaviors, interventions, etc.)**

Include a description of the performance evaluation (information about contest, performance, and/or portfolio), dates performance occurred, name of who was judge/jury/reviewer and their qualifications to fill that role.

Formal identification by CDE’s requirements include identifying students “…so exceptional or developmentally advanced that they require special provisions to meet their educational programming needs.” Provide documentation of specific information that shows the student requires special provisions (not just typical differentiation). These may be from observations, interviews, interventions already provided (and need to continue), or will need to be provided to support growth of the student’s exceptional or developmentally advanced abilities. Include information on:

* Type of interpretive or descriptive information
* Intensity (level or degree) of characteristic, behavior, or intervention
* Frequency (within days, lesson/units, years) of behavior or interventions
* Progress (growth) with special provisions or lack of progress (growth) indicating a need for special provisions

Click here to enter text.

**Review team members:** Click here to enter text.Date of review: Click here to enter a date.

**Review team recommendations or other notes**:

Click here to enter text.

**Review team determination:**

Formally Identify in Specific Talent Aptitude

Visual Arts Performing Arts Music Dance Psychomotor Creativity  Leadership

Student may need to be referred for special education assessment in addition to his/her gifted identification

Data does not support identification at this time

Continue in Talent Pool (based on school team decision)

Begin Talent Pool (based on school team decision)

Collect additional data and bring back to review team

Other Click here to enter text.

**Dates copies of this completed form was:**

Sent to parents Click here to enter a date. Uploaded to Alpine or Enrich Click here to enter a date.

Sent to all teachers Click here to enter a date.

**If formally identified:**

Filed in Cum Folder Click here to enter a date. Coded in Synergy Click here to enter a date.

ALP finalized in Alpine or Enrich (needs to be within 30 school days of Review Team decision) Click here to enter a date.

Referred to MTSS team for possible special education assessment (only if needed) Click here to enter a date.