

**Washington Local School District
Educational Service Center of Lake Erie West
Gifted Written Education Plan**

Student _____ Graduation Year _____ WEP Written On _____

Home School _____ Entered LEAP _____ Grade _____

Parent/Guardian _____

Address _____ Phone _____

Phone _____

IDENTIFICATION—Identified Gifted According to Ohio Standards

<input type="checkbox"/>	Superior Cognitive:	Test Name _____	Score _____	Date of Test _____
<input type="checkbox"/>	Specific Academic:	Test Name _____	Date of Test _____	
		Reading _____	Mathematics _____	Social Studies _____
		Science _____		
<input type="checkbox"/>	Creative Thinking:	Test Name _____	Score _____	
		Checklist Name _____	Score _____	Year _____
<input type="checkbox"/>	Visual/Performing Arts:	Checklist Name _____	Documented Performance _____	
		Music _____	Drama _____	Visual Arts _____

Check appropriate box(es) of service

GRADE													Service Delivery During School Year
K	1	2	3	4	5	6	7	8	9	10	11	12	
													Resource room pull-out (LEAP)
													Cluster Grouping / Adjusted Curriculum
													Acceleration (see WAP)
													Advanced Placement Class
													Honors
													Seminars, Small Group Enrichment, Mentorships
													Academic Competitions/Clubs
													Distance Learning
													Post Secondary Enrollment
													Counseling in Career Options
													Other:

*Students who participate in gifted services are not assigned work missed in the regular classroom if this work provides practice or review, has been mastered, or would be mastered easily if presented in another format.

Teachers should attempt to introduce new concepts and schedule tests at a time when gifted students are in the regular classroom.*

Reviewer of this Written Evaluation Plan:

Student: _____

Parent/Guardian: _____

Gifted Intervention Specialist: _____

Gifted Coordinator: _____

Regular Ed. Classroom Teacher: 3rd _____

4th _____

5th _____

6th _____

Progress Evaluation
Written Education Plan reviewed annually in May

3rd Grade _____

Parent Orientation _____

Parent Conference _____

Parent WEP Review Meeting _____

GIS Signature

Parent Signature

4th Grade _____

Parent Conference _____

Parent WEP Review Meeting _____

GIS Signature

Parent Signature

5th Grade _____

Parent Conference _____

Independent Study and Parent WEP
Review Meeting _____

GIS Signature

Parent Signature

6th Grade _____

Student / Parent Conference _____

Junior High Preview and Parent WEP
Review Meeting _____

GIS Signature

Parent Signature

7th Grade _____

Parent WEP Review Meeting _____

GIS Signature

Parent Signature

8th Grade _____

Parent WEP Review Meeting _____

GIS Signature

Parent Signature