

Taylor ISD

Gifted and Talented Handbook

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[Texas State Plan for the Education of Gifted/Talented Students](#)

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Texas State Definition of Giftedness (TEC 29.121)

“Gifted and talented student” means a child or youth who performs at or shows the potential for performing at a remarkably high level of accomplishment when compared to others of the same age, experience, or environment and who:

- (1) exhibits high performance capability in an intellectual, creative, or artistic area;
- (2) possesses an unusual capacity for leadership; or
- (3) excels in a specific academic field.

State Goal for Services for Gifted/Talented Students

Students who participate in services designed for gifted/talented students will demonstrate skills in self-directed learning, thinking, research, and communication as evidenced by the development of innovative products and performances that reflect individuality and creativity and are advanced in relation to students of similar age, experience, or environment. High school graduates who have participated in services for gifted/talented students will have produced products and performances of professional quality as part of their program services.

Taylor ISD’s Goals for Gifted and Talented Services

Taylor ISD’s Gifted and Talented services are aligned with the state goal for G/T services and support the district's mission to educate, value, and nurture students through innovative and personalized educational experiences while celebrating our diversity.

Taylor ISD commits to the following:

- **Fidelity of Services:** Comply with gifted/talented accountability standards and monitor the effectiveness of assessment and services for gifted/talented students.
- **Student Identification:** Procedures and progress monitoring allow students to demonstrate and develop their diverse talents and abilities.
- **Service Design:** Implement research-based service options to meet the needs and reinforce the strengths and interests of gifted/talented students.
- **Curriculum and Instruction:** Modify the depth, complexity, and pacing of the curriculum and instruction ordinarily provided by the school.
- **Professional Learning:** All personnel involved in the planning, creation, delivery and administration of services to gifted/talented students will possess the knowledge required to develop and provide differentiated programs and services.
- **Family/Community Involvement:** Include family and community members in services designed for gifted/talented students throughout the school year.

G/T Student Identification and Assessment

District Identification Timeline:

Timeline	Procedure
September 1-8th	Send the cogAT screening letter home with all 2nd graders
September 22-October 1	2nd Grade CogAT Universal Screener <ul style="list-style-type: none"> Campus staff will review results to identify students who may benefit from a campus GT screening nomination
October 1-8	K-8 Staff Meetings/PLC to share GT Nomination and Data Collection Process Communicate the GT Nomination Timeline and Process to the community <ul style="list-style-type: none"> Social Media, Principal Newsletters, TISD Website, etc
October 6-10	District Parent meeting sharing GT Characteristics and Nomination Process

25-26 Identification Process and Communication Deadlines		
1st-12th		Kindergarten
Oct 14th - Oct 24th	Nomination Period: Campus GT coordinator receives referrals from parents/staff	Jan 7th - Jan 20th
By Oct 30th	Campus GT Coordinator contacts referring parents and staff about the GT process/timeline for GT identification	By Jan 21st
Nov 3rd-Nov 13	Nomination Process: <ol style="list-style-type: none"> Provide GT Assessment Information Packets to teachers Provide Parent forms to parents/guardians Collect work samples for the portfolio from teachers Administer CogAT assessment 	Jan 22th - Feb. 6th
Dec 1st-Dec 12th	Campus Committee Decision: <ul style="list-style-type: none"> Completes the scoring rubric for each portfolio Campus GT coordinator completes the matrix, and the committee meets to make identification decisions Campus GT coordinator will invite district GT coordinator to the campus review meetings <ul style="list-style-type: none"> GT staff from other campuses may be invited Campus Contact completes the Gifted Compilation Testing Log and sends a copy to District Coordinator 	Feb 9th - Feb 13th
Last week of school in Dec	Campus GT Coordinator sends results letters to parents	Feb 12th - Feb 19th
By Jan 16th	Newly identified students are identified in TEAMS	By Feb 21st
First week of 2nd semester	Newly identified students begin services according to the campus schedule	Week after spring break

Parents are informed of the identification process through the district handbook and/or the district website.

Step 1: Referral

Students can be referred for gifted/talented (G/T) testing one time per year in either October, grades 1-12, or January for Kindergarten referrals. A parent/guardian, peer, or teacher can refer students for G/T testing by submitting a referral sheet obtained from the district website or from the counselor's office on the student's home campus.

Step 2: Assessment

Students referred for G/T testing will be tested one time per year in either the fall window for grades 1-12 (October-November) or through the spring (January) window for Kindergarten.

Step 3: Student Identification

The selection committee consisting of a majority of members who have completed their thirty (30) hours of G/T training will review assessment data to determine if G/T services best meet the needs of students. Multiple factors, including both qualitative and quantitative measures, are taken into account during the identification process.

Step 4: Notification

Parent/guardian will be notified by email of the final determination of students' need for G/T services after selection committees meet.

Universal Screener

A universal screener is an assessment that is given to the entire group and not just those who were referred for screening. These scores are reviewed and recommendations for referrals are made for students who meet specified criteria. The intent of universal screening is to include, not to exclude, students from the process. Every effort is made to identify equitably, promote inclusivity for all populations, and ensure our demographic in Gifted and Talented services mirrors that of our district when reviewing students for possible referral. Taylor ISD administers the cogAT, a multiple-choice test designed to measure a child's academic aptitude as well as to identify gifted students in the United States. The results are reviewed by the G/T Coordinator who refers students who demonstrate a higher level of performance in relation to their peers.

Assessment Instruments

Taylor ISD uses both quantitative and qualitative assessment instruments to gather data on students referred for G/T services. Assessment instruments include an academic

achievement test, cognitive abilities test, a teacher rating scale, or other rating scales, as deemed appropriate for the student.

Assessments needed in other languages and accommodations noted in a student's IEP or 504 are handled on a case by case basis.

Qualification Process

The student profile identifies the student's strengths and weaknesses. The percentiles and/or scores from the assessment instruments are plotted on the student profile. Each student's profile is individually evaluated by the Gifted/Talented Committee through a blind (no name) process. A student clearly qualifies for Gifted/Talented services if the majority of the evidence on the profile falls within the High and/or Superior ranges on the profile. The decision is based on the committee's observation of the preponderance of the evidence on the student's profile.

The Gifted/Talented committee consists of at least three district educators consisting of an administrator or designee, a G/T trained teacher, the campus counselor, and a teacher with direct contact with the nominee. All committee members have been trained in nature and needs of gifted students. The Gifted/Talented Committee makes a professional judgment based on the recorded student profile data. As the committee evaluates the data on the students nominated, the committee has three options:

- The preponderance of profile data indicates the student exhibits educational need and would benefit from the services offered in the Gifted/Talented.
- There is insufficient evidence in the documentation at this time indicating the student's educational needs would best be met by the Gifted/Talented program. The preponderance of evidence indicates the student's educational needs would best be served with the services of the regular curriculum.
- Further information is requested for the committee to make a qualification decision.

Once the identification process is complete, parents or guardians are notified of the Gifted/Talented Committee's decision within ten school days. Parents of all screened students may request a conference to examine their child's assessment results. Requests should be made through the student's home campus.

Students who do not qualify for G/T services may be referred again during subsequent referral periods. Students can be tested one time per calendar year.

Transfer Students

When a student identified as gifted by a previous school district enrolls in the District,

the District shall place the student in the District's program for gifted education students within 30 days of enrollment. (TISD LOCAL, EHBB).

Furlough Provisions

Furlough is defined as a temporary leave of absence from program services due to a variety of circumstances. A furlough may be initiated by the District, the parent, or the student. Requests for a furlough will be given to the campus administrator and members of the Gifted/Talented committee for consideration. A student may be furloughed for a period of time deemed appropriate by the Gifted/Talented committee. At the end of the furlough, the student's progress shall be reassessed, and the student may re-enter the Gifted/Talented program, be removed from the program, or be placed on another furlough. It is recommended that a furlough should not extend past the end of the school year of which the furlough was requested. (Taylor ISD LOCAL EHBB).

A furlough does not indicate a permanent exiting of the program. Any student may be granted a furlough from the program for various issues such as over commitment, family concerns, serious illness, or any other circumstances which would inhibit or curtail the student's performance in the program. The furlough may also be used prior to a formal exit from the program for those students who are unable to maintain satisfactory performance within the learning opportunities of the Gifted/Talented program. A furlough is arranged to meet the individual needs of the student.

Exit Provisions

The G/T selection committee, parent of the child, and person recommending exit from G/T services may consider exiting a student from G/T services due to a variety of circumstances. Exiting of a student for educational, psychological and/or personal reasons may include, but are not limited to, the following criteria:

- Teacher recommendations based on observations of student behavior, performance, physical changes, and products
- Counselor recommendations based on interviews and observations
- Parental requests for withdrawal from the program or service
- Student requests for withdrawal from the program or service with parental permission
- Reevaluation data

The District shall monitor student performance in gifted services. If at any time the selection committee determines it is in the best interest of the student and his or her educational needs, the committee may exit a student from the program. If a student or parent requests removal from services, the G/T committee shall meet with the parent and student before honoring the request.

APPEALS PROCESS

A parent or student may appeal any final decision of the selection committee regarding selection for or exit from Gifted Education Services. Appeal shall be made first to the selection committee. Any subsequent appeals shall be made in accordance with FNG (LOCAL) beginning at Level Two.

G/T Service Design and Curriculum and Instruction

Taylor ISD offers an array of learning opportunities that emphasize content in the four core academic areas including: Language Arts, Math, Science, and Social Studies. Services will be available during the school day throughout the year. Taylor ISD meets the needs of G/T students by modifying the depth, complexity and pacing of the curriculum and instruction ordinarily provided by the school.

Below are descriptions of the services Taylor ISD offers our G/T students:

Differentiation

Teachers follow the Texas Essential Knowledge and Skills (TEKS) based curriculum and differentiate instruction to meet the needs of students. Differentiation is an instructional model guiding teachers in developing classrooms actively attentive to the needs of academically diverse student populations. The approach of differentiating instruction advocates active planning for student differences in the classroom.

Texas Administrative Code §89.3. Student Services

School districts shall provide an array of learning opportunities for gifted/talented students in kindergarten through grade 12 and shall inform parents of the opportunities. Options must include:

- (1) instructional and organizational patterns that enable identified students to work together as a group, to work with other students, and to work independently;
- (2) a continuum of learning experiences that leads to the development of advanced-level products and performances;
- (3) in-school and, when possible, out-of-school options relevant to the student's area(s) of strength that are available during the entire school year; and
- (4) opportunities to accelerate in areas of strength.

Source: The provisions of this §89.3 adopted to be effective September 1, 1996, 21 TexReg 5690.

A continuum of learning experiences will be provided in the Gifted/Talented services which lead to the development of advanced-level products and/or performances. Such services may include use of depth and complexity elements, differentiation of content, process and/or product in the Honors/AP classroom, OnRamps, dual credit, a pull-out program, independent studies, concurrent or dual-enrollment classes, and other

services as deemed appropriate for the student. Services are available in all four core academic areas including Language Arts, Math, Science and Social Studies.

Social and Emotional Needs of the Gifted

Training is provided to teachers regarding how to meet the social and emotional needs of G/T students. The counselor serves as a resource to address these needs. In addition, G/T staff are available to provide support to teachers and students.

GT Showcase

Opportunities are provided for students to pursue areas of interest in selected disciplines through guided and independent research. Experiences that result in the development of sophisticated products and/or performances that are targeted to an audience outside the classrooms are provided and should be showcased at the annual campus showcase. Students are strongly encouraged to participate in the GT showcase.

Professional Learning

PROFESSIONAL DEVELOPMENT AND ONGOING TRAINING IN GIFTED EDUCATION

Taylor Independent School District is committed to providing its staff with appropriate and meaningful professional development which enables the staff to meet the unique and individual educational needs of all students including services for gifted/talented students. It is important that all staff who are responsible for formally servicing these students obtain appropriate training for educating the gifted child. The district will require at least the minimum hours of training as mandated by the state:

Texas Administrative Code §89.2. Professional Development

School districts shall ensure that:

(1) prior to assignment in the program or within one semester of assignment, teachers who provide instruction and services that are a part of the program for gifted/talented students have a minimum of 30 hours of professional learning that includes nature and needs of gifted/talented students, assessing student needs, and curriculum and instruction for gifted/talented students;

(2) teachers who provide instruction and services that are a part of the program for gifted/talented students receive a minimum of six hours annually of professional learning in gifted/talented education; and

(3) administrators and counselors who have authority for program decisions have a minimum of six hours of professional learning that includes nature and needs of gifted/talented students and program options with an update after legislative sessions.

Source: The provisions of this §89.2 adopted to be effective September 1, 1996, 21 TexReg 5690; amended to be effective February 13, 2000, 25 TexReg 776; amended to be effective September 1, 2024, 49 TexReg 6454.

Family and Community Involvement

Annual Parent Orientation

Parents of newly identified G/T students will have the opportunity to attend a meeting at the beginning of the fall semester to learn about the district's G/T services.

GT Showcase

Taylor ISD will hold a GT showcase once a year for parents to attend. Experiences that result in the development of sophisticated products and/or performances that are targeted to an audience outside the classrooms are provided and should be showcased.

Gifted and Talented Assessment Information Meeting

Prior to the fall referral period, parents and guardians will have the opportunity to attend an informational meeting. The meeting will provide information to parents on the student identification process and the service design for students in Taylor ISD.

Gifted Services Evaluation

Evaluation of professional development activities for gifted education is ongoing and related to state teacher education standards, and the results of the evaluation are used in making decisions regarding future staff development plans (19 TAC §89.5 and TAC §233.1).

Websites

District and campus G/T websites provide relevant information for parents including upcoming events, referral and assessment information, etc.

Resources

Student _____ Nominated by _____ Year _____ Gr. _____

Taylor Independent School District Gifted Education Services

Your child has been nominated to be screened for services provided to gifted education students. These services will encourage students to demonstrate skills in self-directed learning, thinking, research, and communication as evidenced by the development of innovative products and performances that reflect individuality and creativity and are advanced in relation to students of similar age, experience, or environment. Taylor ISD is asking your permission to screen your child for these services. The screening involves multiple tests and criteria, and will take 4 – 8 weeks to be completed. This letter also serves as permission to begin providing services to your child once identified by the Gifted Selection Committee as needing the services.

Those students identified as needing gifted education services will begin receiving services shortly after parent notification.

Please sign and return this form to your child's campus counselor.

Taylor ISD has my permission to test my child, _____, for gifted education services. Taylor ISD also has my permission to render such services as recommended by the Gifted Education Campus Selection Committee.

Student's Language Arts Teacher

Student's Current Grade

Parent/Guardian Name _____

Address _____

Daytime phone # _____

Parent/Guardian Signature _____

Parent/Guardian Signature _____

Estudiante _____ Nominado por: _____ Año _____ Grado _____

Distrito Escolar Independiente de Taylor ISD
Servicios de la Educación para Dotados

Su hijo/a ha sido nominado para ser examinado para poder recibir servicios ofrecidos a los estudiantes dotados. Estos servicios animarán a los estudiantes a demostrar sus habilidades auto-dirigidas del aprendizaje, el pensamiento, la investigación y la comunicación cuales se demuestran en el desarrollo de productos innovadores y los resultados que reflejan la individualidad y la creatividad y son avanzados en relación con los estudiantes de la misma edad, experiencia o ambiente. El Distrito Escolar Independiente de Taylor está pidiendo su permiso para evaluar a su hijo para estos servicios. La evaluación incluye varias pruebas y criterios, y tomará 4 a 6 semanas para completarse. Esta carta sirve también como un permiso para que el distrito pueda empezar a ofrecerle servicios a su hijo si se identifica por el Comité de Selección para Dotados que necesita los servicios.

Los estudiantes identificados con necesidad de servicios para los estudiantes dotados serán elegibles para recibir los servicios justo después de la notificación a los padres.

Por favor firme y devuelva esta forma al consejero de la escuela de su hijo.

Taylor ISD tiene mi permiso para evaluar a mi niño, _____, para los servicios de la educación para dotados. Taylor ISD también tiene mi permiso para proveer tales servicios como recomendado por el Comité de Selección del Programa para Estudiantes Dotados.

Maestro de Lenguaje del Estudiante

Grado del Estudiante

Nombre del Padre / Tutor: _____

Dirección: _____

Teléfono (durante el día): _____

Firma de Padre / Tutor: _____

Firma de Padre / Tutor: _____

Taylor Independent School District

Gifted Education Services

Date: _____

Dear Parent/Guardian of _____,

The Gifted Education Selection Committee has met and reviewed your child's information and testing performance. We want to thank you for your interest in having your child tested for Gifted services, and hope you will continue to nurture your child's interests and academic aptitude. At this time, we would like to inform you that

_____ Your child indicates a need for Gifted services and has been placed in Gifted Education to receive services in the four core academic areas.

_____ Your child does not meet the Taylor ISD assessment criteria for Gifted services.

It is an honor for your child to have been nominated for Gifted Education and to have made it this far in the gifted selection process. Please remember that each year your child has the opportunity to be nominated. We thank you for your patience and support in this process. If you have any questions or concerns, please contact the campus counselor.

Sincerely yours,

Distrito Escolar Independiente de Taylor ISD

Servicios de la Educación para Dotados

Fecha: _____

Estimados Padres/Tutores de _____,

El Comité de Selección del Programa para Estudiantes Dotados se ha reunido para analizar los resultados de las pruebas y otra información tocante a su hijo/a. Queremos agradecerle por su interés en lograr que su niño haya tomado las pruebas para los servicios para Dotados y esperamos que usted siga cultivando los intereses y aptitudes académicas de su hijo/a. En este momento, queremos informarle de que:

_____ Su hijo/a sí indica una necesidad de Servicios para Dotados y empezará a recibir los
Servicios de la Educación para Dotados en las cuatro áreas académicas.

_____ Su hijo/a no logró los criterios de las pruebas de habilidades de Taylor ISD para recibir
Servicios de la Educación para Dotados.

Es un honor que su hijo/a haya sido nominado para la Educación para Dotados y que haya alcanzado llegar a este punto en el proceso de selección. Por favor, recuerde que su niño tiene la oportunidad de ser nominado cada año escolar. Agradecemos su paciencia y apoyo en este proceso. Si usted tiene alguna pregunta, favor de ponerse en contacto con el Consejero de la escuela de su hijo/a.

Atentamente,

Taylor Independent School District Gifted Education Services

(Date)

Dear Parents/Guardians of _____,

In reference to your son's/daughter's participation as a Gifted Education student in the Taylor Independent School District, a **furlough from the program has been requested by you.**

As explained in the TISD's Gifted Education Services Plan, furlough status is offered for a temporary period of time. At the conclusion of the designated furlough time, you will need to make a decision whether or not your student will re-enter the program on an active basis.

*Cut Along This Line*_____

Taylor Independent School District Gifted Education Services

Return this permission form no later than _____ to the campus school counselor.

PARENT PERMISSION FORM REQUEST FOR FURLOUGH

I request a furlough for my son/daughter from Gifted Education Services. I understand that at the conclusion of the designated furlough time, I can decide whether I want my child to continue on furlough or whether I want my student to again actively participate in Gifted Education Services.

(Print Student's Name)

(Current Grade Level)

(Student's Signature)

(Date)

(Print Parent's/Guardian's Name)

(Parent's/Guardian's Signature)

(Date)

Distrito Escolar Independiente de Taylor

Servicios de la Educación para Dotados

(Fecha)

Estimados Padres / Tutores de _____,

En referencia a la participación de su hijo / hija como un estudiante de la Educación para Dotados en el Distrito Escolar Independiente de Taylor, **un permiso para semiliberar a su hijo del Programa ha sido solicitada por usted.**

Como se explica en el Plan de Servicios de la Educación para Dotados de TISD, el status de permiso para semiliberar se ofrece por un período limitado de tiempo. Por lo tanto, al comienzo del año escolar siguiente, usted tendrá que tomar una decisión o no para que su hijo vuelva a participar en el programa en forma activa.

----- Corte a lo largo de esta línea -----

Distrito Escolar Independiente de Taylor Servicios de la Educación para Dotados

Devuelva este formulario de autorización no más tarde de _____ al consejero de la escuela.

FORMULARIO DE PERMISO DE PADRES PARA SOLICITUD DE SEMILIBERTAD

__ Solicito un formulario de semilibertad para mi hijo/hija de los Servicios de la Educación para Dotados para la duración de este año escolar. Tengo entendido que al comienzo del próximo año escolar, puedo decidir si quiero que mi hijo continúe en el status de semilibertad o si quiero que mi estudiante vuelva a participar activamente en los Servicios de la Educación para Dotados.

(Nombre del Estudiante)

(Grado)

(Firma del Estudiante)

(Fecha)

(Nombre del Padre/Tutor)

(Firma del Padre/Tutor)

(Fecha)

Taylor Independent School District

Gifted Education Services

Dear Parents/Guardians of _____,

Based upon your request, your child has been on furlough from Taylor's Gifted Education Services during the _____ - _____ school year. During this time your child did not receive any additional gifted education services.

Furlough status is offered for a temporary period of time only.

At this time, we need to know if you wish to have your child placed back into Gifted Education Services or remain on furlough from Taylor's Gifted Education Services. Please fill out the form as soon as possible and return to your child's teacher.

Cut Along This Line

Taylor Independent School District Gifted Education Services

PARENT PERMISSION FORM FURLOUGH STATUS

_____ I give my permission for my child to be placed back into Gifted Education Services.

_____ I prefer for my child to remain on furlough and not receive Gifted Education Services.

(Student's Name/Grade)

(Homeroom Teacher's Name)

(Parent's/Guardian's Daytime Phone Number)

(Print Parent's/Guardian's Name)

(Parent's/Guardian's Signature)

Distrito Escolar Independiente de Taylor

Servicios de la Educación para Dotados

Estimados Padres / Tutores de _____,

Basado en su solicitud, colocamos a su hijo/hija en un status de semilibertad de los Servicios de la Educación para Dotados durante el año escolar de _____ - _____. Esto significa que su hijo no recibió servicios adicionales para los dotados.

El status de semilibertad se ofrece por un período limitado de tiempo solamente.

En este momento, necesitamos saber si usted desea que su hijo vuelva a participar en los Servicios de la Educación para Dotados o si prefiere que se quede en el status de semilibertad y no participe en los Servicios de la Educación para Dotados. Por favor, rellene el formulario tan pronto como sea posible y devuélvelo a la maestra de su hijo.

----- Corte a lo largo de esta línea -----

Distrito Escolar Independiente de Taylor Servicios de la Educación para Dotados

FORMULARIO DE PERMISO DE PADRES STATUS DE SEMILIBERTAD

_____ Yo doy mi permiso para que mi niño sea colocado de nuevo en los Servicios de Educación para Dotados.

_____ Yo prefiero que mi hijo permanezca en la lista de semilibertad y que no reciba los Servicios de Educación para Dotados.

(Nombre de Estudiante/Grado)

(Nombre de Maestro)

(Número de teléfono de Padre/Tutor)

(Nombre de Padre/Tutor)

(Firma de Padre/Tutor)

Taylor Independent School District Gifted Education Services

(Date)

Dear Parents/Guardians of _____,

By your request, your son/daughter will be exited from Gifted Education Services.

As explained in the TISD's Gifted Education Services Plan, please understand that he/she will no longer participate in gifted services and, to re-enter gifted services in the future, he/she must successfully complete the screening process.

Please complete the form below, sign and return the form no later than _____ to the campus school counselor.

Cut Along This Line _____

Taylor Independent School District Gifted Education Services

Return this permission form no later than _____ to the campus school counselor.

PARENT PERMISSION FORM

TO EXIT GIFTED EDUCATION SERVICES

I **DO** wish that my son/daughter be exited from Gifted Education Services and discontinue participation in the services. I understand that to re-enter the services in the future, he/she must, at that time, successfully complete the screening process again.

(Student's Signature)

(Date)

(Print Parent's /Guardian's Name)

(Parent's/Guardian's Signature)

(Date)

Distrito Escolar Independiente de Taylor

Servicios de la Educación para Dotados

(Fecha)

Estimados Padres / Tutores de _____,

Por su solicitud, su hijo / a saldrá de los Servicio de Educación para Dotados.

Como se explica en el Plan de Servicios de la Educación para Dotados de TISD, queremos que comprenda que él / ella ya no participará en los servicios y que para volver a continuar con los servicios en el futuro, él / ella debe completar el proceso de selección y ser seleccionado una vez más a ese tiempo.

Por favor complete el siguiente formulario, firme y devuélvelo no más tarde que el _____ al consejero de la escuela.

----- Corte a lo largo de esta línea -----

Distrito Escolar Independiente de Taylor

Devuelva este formulario de permiso no más tarde de _____ al consejero de la escuela.

FORMULARIO DE PERMISO DE PADRES

PARA LA SALIDA DE LOS SERVICIOS DE LA EDUCACIÓN PARA DOTADOS

 Sí deseo que mi hijo/hija ya **no** participe en los Servicios de la Educación para Dotados. Comprendo que al volver a continuar con los servicios en el futuro, él / ella debe completar con éxito el proceso de selección, una vez más a ese tiempo.

(Firma de Estudiante)

(Fecha)

(Nombre de Padre/Tutor)

(Firma de Padre/Tutor)

(Fecha)

**TAYLOR Independent School District
Gifted/Talented Referral Form**

I, _____, as parent/guardian/teacher/community member would like to refer
(Please print)(Please circle)

_____ for the Gifted/Talented screening and assessment process. I believe this
(Print student's name)

child has an extraordinarily high level of intellectual or academic ability and that his/her educational needs can best be met by Gifted/Talented Services. I understand the school district will make every effort to determine the best possible educational services based on the student's educational needs. This child is currently in grade _____.

Signature of person making referral

Date

Formulario de Referencia para Servicios Dotados
Distrito Escolar Independiente de Taylor
Formulario de Referencia Servicios Dotados

Yo, _____, como un padre/tutor/ maestro/miembro de la comunidad
(Favor de escribir su nombre) (Please circle)

quisiera referir a _____ para el proceso de evaluación para dotados. Yo creo
(Favor de escribir el nombre del estudiante)

que este niño/a tiene un nivel intelectual sobresaliente o una habilidad académica alta y que el Programa de Educación para Dotados puede proveerle los servicios que más necesita. Entiendo que el distrito escolar hará todo lo posible para determinar cuales servicios académicos tiene mejor beneficio para el estudiante basado en las necesidades académicas del estudiante. El estudiante está en el grado _____.

Firma de la persona haciendo la referencia

Fecha