**GIEP Completion Checklist**

**This cover sheet MUST be completed prior to sending the final copies to the student services office upon conclusion of the GIEP meeting. (Invite, GIEP and NORA)**

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| --- | --- | --- | --- | --- |
| Student Name: |  |  | Last GIEP Meeting Date: |  |
| Case Manager: |  |  | New GIEP Team Meeting Date: |  |

|  |  |  |
| --- | --- | --- |
| **Yes** | **No** | **Areas being monitored** |
| ☐☐☐ | ☐☐☐ | **Demographics:**   * Contact information up-to-date and complete for accuracy * Meeting date included * Complete and accurate including implementation date |
| ☐  ☐  ☐  ☐  ☐ | ☐  ☐  ☐  ☐  ☐ | **Dates are correctly identified:**   * Implementation date – when services will begin * Implementation date is 5 to 10 calendar days from team meeting date for physical meeting - if NORA was given to parents at the meeting. * Implementation date is 10 calendar days from team meeting date if mailed to parents. (If NORA was not given to the parents at the meeting.) * Implementation date is the first student day of the following school year when the GIEP is held within 30 calendar days of the end of the current school year * Anticipated duration of services – GIEP meeting date minus 1 day   + For seniors, the end date for the anticipated duration date, needs to be the last student day of the current school year |
| ☐ | ☐ | **GIEP contains signatures of all that attended:**      District Rep, gifted education teacher, current teacher, parent(s), student if permitted to attend.      Must be documented if parent cannot attend the GIEP meeting (re:  invitation) |
| ☐ | ☐ | **NORA signed off by parent and dated correctly:**   * Parent initialed receipt of the Notice of Parental Rights * For senior students, if the GIEP is occurring 30 calendar days before the end of the school year, check box #4 |
| ☐  ☐  ☐☐☐ | ☐  ☐  ☐☐☐ | **Present Levels:**   1. Academic/Cognitive Strengths: Narrative includes information from **parent, teacher, student** that describes the student as a learner and a thinker (Initial GIEP includes GWR results in this section) 2. Achievement Results (aligned to grade-course level standards to indicate instructional level): Standardized assessments including assessment tables with explanation of data 3. Progress on Goals (for annual review only) after initial GIEP with progress on goals’ data 4. Aptitudes, interests, specialized skills, products and evidence of effectiveness in other academic areas 5. Grades/Classroom Performance as Indicated by Subject Area Teachers and summative sentence |
| ☐  ☐  ☐ | ☐  ☐  ☐ | **Goals and Outcomes:**   * **Annual Goal:** * Aligned to standards outlined in the curriculum * Annual goal is strength-based and evidenced in PLEP * Goal targets accurate instructional level of student * **Short Term Learning Objective:** * Demonstrates how the goal will be accomplished * Lists expected level of achievement for mastery under objective criteria (reported as a percentage/level) * Assessment procedures are aligned to objective criteria * Applicable timelines are listed for each assessment * **Goal Specific SDIs:** * SDI goes above and beyond what is offered in the general education classroom (Not a Tier 1 enrichment strategy) * GIEP provides clarity on projected date of initiation, frequency, location, and duration * The SDI’s support the attainment of the short term objectives |
| ☐ | ☐ | **Support Services Needed to Assist Gifted Student to Benefit From Gifted Education**   * If applicable, a 504 or medical action plan is referenced in the GIEP for additional supports under Chapter 15. |

**Send completed Invite, GIEP and NORA to the student services office, ensure the following:**

\_\_\_Yes \_\_\_No Above checklist is complete \_\_\_Yes \_\_\_No Copy of Invite, GIEP and NORA was provided to parents,

gifted teacher file and Class B student file

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Signature of Case Manager/Date Signature of District Representative/Date