

Student Name: Reyn Raider

### Written Education Plan (WEP)

Student Name: <u>Reyn Raider</u>	Date of Birth: _____	Grade Level: _____	<input type="radio"/> Male	<input type="radio"/> Female
Student Identification Number: _____	Student Address: _____			
Parent/Guardian: _____	Parent Address: _____			
Email: _____	Home Phone: _____	Work Phone: _____		
District of Residence: <u>Reynoldsburg CSD</u>		District of Service: _____		
Meeting Date: <u>09/03/2018</u>	Does student have Written Acceleration Plan? <u>No</u>			
Target graduation date: _____				

Area(s) and date(s) of Identification:

- Superior Cognitive Ability: 201809
- Creative Thinking Ability: \_\_\_\_\_

Specific Academic Ability:

- Reading/Writing/Combination: 201809       Mathematics: 201809
- Science: \_\_\_\_\_       Social Studies: \_\_\_\_\_

Visual Performing Arts:

- Drama: \_\_\_\_\_       Dance: \_\_\_\_\_       Music: \_\_\_\_\_
- Visual Arts: \_\_\_\_\_

Student interests and learning styles:

Reyn prefers hands-on learning activities, and is highly engaged during project-based learning. Reyn prefers to work independently, but when working in groups, is willing to step up and take a leadership role to help his partner(s) accomplish a given task.

Present levels of academic and social/emotional functioning:

Reyn scored in the Advanced level on his previous Ohio State Tests in both reading and mathematics. On the most recent i-Ready assessment, Reyn scored slightly above grade level in mathematics, and two grade levels above his current grade in reading.

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## Written Education Plan (WEP) Annual Goal Page

Annual Goal: \_\_\_\_\_ Goal #: 1 of 1

By the end of the school year, Reyn will score 95% or higher on 3 of 4 independent reading projects as demonstrated on a rubric.

Content area(s) to be addressed by this goal:

Reading/Language Arts

Area of identification associated with this goal:

- Superior Cognitive Ability
- Specific Academic Ability: Reading
- Creative Thinking Ability
- Visual Performing Arts: \_\_\_\_\_

What specific program components or curricular interventions will assist in accomplishing this goal? Consider the differentiation concepts of acceleration, complexity, depth, challenge, abstractness, and/or cognitive creativity.

Reyn will participate in a program with curriculum compacting, which allows students to pursue enrichment opportunities upon demonstrating mastery of new concepts. Reyn will also design and complete independent study projects based on interest and learning standards being covered in class.

State the policy for waiver of assignments and scheduling of tests.

Not applicable (N/A) - Reyn will not be pulled out of class to receive gifted services; all services are provided within the general education classroom.

Student Progress Measures (How will this student prove mastery of this goal?)

Each quarter, Reyn will complete an independent reading project. Reyn must score a 95% or higher on 3 of 4 projects, as scored on a rubric.

Service Setting for this goal/objective:

- Gifted Resource Room     Gifted Self-Contained Class     Regular Education Class (GIS)
- Regular Education Class (Gen. Ed. Teacher)     Acceleration Placement
- Arts Classroom (specify): \_\_\_\_\_     Internship/Mentorship     Advanced Placement
- Educational Options     Dual Enrollment including PSEO

Personnel Responsible for Service:

- Gifted Intervention Specialist     General Education Teacher     Arts Specialist     Gifted Coordinator
- Other: \_\_\_\_\_

Student Name: Reyn Raider

**Written Education Plan (WEP)  
Signature Page**

**WEP effective dates from** 10/1/2018 **to** 9/30/2019 **Date of Next Review:** 10/1/2019

<b>WEP Team Meeting Participants (choose all that apply)</b>			
Check one of the following: This WEP team meeting was a <input type="checkbox"/> Face to face meeting <input type="checkbox"/> Video conference <input type="checkbox"/> Telephone Conference/Conference Call <input checked="" type="checkbox"/> Mail Correspondence			
Student: Reyn Raider (signature)	<input type="radio"/> Participated <input checked="" type="radio"/> Excused	Parent:  (signature)	<input type="radio"/> Participated <input checked="" type="radio"/> Excused
Gifted Intervention Specialist:  (signature)	<input type="radio"/> Participated <input type="radio"/> Excused	Parent:  (signature)	<input type="radio"/> Participated <input checked="" type="radio"/> Excused
Gifted Coordinator: James A. Young (signature)	<input checked="" type="radio"/> Participated <input type="radio"/> Excused	Principal/Administrator:  (signature)	<input type="radio"/> Participated <input type="radio"/> Excused
General Education Teacher:  (signature)	<input type="radio"/> Participated <input type="radio"/> Excused	Other:  (signature)	<input type="radio"/> Participated <input type="radio"/> Excused
General Education Teacher:  (signature)	<input type="radio"/> Participated <input type="radio"/> Excused	Other:  (signature)	<input type="radio"/> Participated <input type="radio"/> Excused

<b>Reporting Periods</b>	1st Date: <u>12/21/2018</u>	2nd Date: <u>5/23/2019</u>	3rd Date: _____	4th Date: _____
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<p><b>Initial WEP</b></p> <input type="checkbox"/> I give consent to initiate gifted education and related services specified in this WEP. <input type="checkbox"/> I give consent to initiate gifted education and related services specified in this WEP except for _____ <input type="checkbox"/> I do not give consent for gifted education at this time.  Parent Signature: _____ Date: _____	<p><b>Parent Notice of District Service Options/Copy of the WEP</b></p> <input type="checkbox"/> I have received a copy of the Identification Procedures for the District <input type="checkbox"/> I have received a copy of the District Service Options <input type="checkbox"/> I have received a copy of this WEP  Parent Signature: _____ Date: _____
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