

Personal Education Plan
Flagstaff Unified School District
Gifted Education

Student:		Birth Date:	
Grade:		Date Plan Completed:	

I. Qualifying Areas *(Please check all that apply.)*

<input type="checkbox"/> Verbal Reasoning	<input type="checkbox"/> Quantitative Reasoning	<input type="checkbox"/> Non-Verbal Reasoning
---	---	---

II. Options for Classroom Modifications
Differentiation Strategies (Check all that apply.)

<input type="checkbox"/> Cross-Grade Grouping	<input type="checkbox"/> Tiered Assignments	<input type="checkbox"/> Foreign Language (Puente de Hozho Only)
<input type="checkbox"/> Independent Study	<input type="checkbox"/> Project Based Learning	<input type="checkbox"/> Northern Arizona Distance Learning
Clubs/Activities		
<input type="checkbox"/> Art	<input type="checkbox"/> Science	<input type="checkbox"/> Odyssey of the Mind
<input type="checkbox"/> Chess	<input type="checkbox"/> Music	<input type="checkbox"/> Math Olympiad

III. Academic Data

Academic Area	Student's Current Functioning	Assessment Used

Comments:

General Education Teacher	Signature	Date
Parent	Signature	Date