



CENTENNIAL SCHOOL DISTRICT
K – 6 TAG Planning Sheet



[_____]
 label

- Fall Conference
- Spring Conference
- New TAG ID _____
Date
- End of Year Summary

TAG Areas of Identification (check only one)

- Intellect (A)
- Math (M)
- Reading (R)
- Reading and Math (B)
- Potential to Perform (C)

Student Name _____ Student ID# _____ Date _____
 School _____ Teacher(s) _____ Grade _____ School Year _____

	LEVEL OF LEARNING (List type of assessment.)	RATE OF LEARNING (Check all that apply for each subject.)	DIFFERENTIATED INSTRUCTION AND STRATEGIES (Check all that apply for each subject.)
MATH	<input type="checkbox"/> Above grade level <input type="checkbox"/> At grade level <input type="checkbox"/> Below grade level Type of Assessments _____ _____ _____	Student <input type="checkbox"/> Completes work quickly & accurately <input type="checkbox"/> Learns with few repetitions <input type="checkbox"/> Uses time wisely <input type="checkbox"/> Completes long-term assignments <input type="checkbox"/> Demonstrates self-motivation	<input type="checkbox"/> Differentiated Assignments <input type="checkbox"/> Compacting Curriculum <input type="checkbox"/> Higher-order Thinking & Questioning Strategies <input type="checkbox"/> Independent Study/Research Project Description/Comments _____ _____ <input type="checkbox"/> No modifications needed at this time. Student performance will continue to be monitored
READING	<input type="checkbox"/> Above grade level <input type="checkbox"/> At grade level <input type="checkbox"/> Below grade level Type of Assessments _____ _____ _____	Student <input type="checkbox"/> Completes work quickly & accurately <input type="checkbox"/> Learns with few repetitions <input type="checkbox"/> Uses time wisely <input type="checkbox"/> Completes long-term assignments <input type="checkbox"/> Demonstrates self-motivation	<input type="checkbox"/> Differentiated Assignments <input type="checkbox"/> Compacting Curriculum <input type="checkbox"/> Higher-order Thinking & Questioning Strategies <input type="checkbox"/> Independent Study/Research Project Description/Comments _____ _____ <input type="checkbox"/> No modifications needed at this time. Student performance will continue to be monitored
WRITING	<input type="checkbox"/> Above grade level <input type="checkbox"/> At grade level <input type="checkbox"/> Below grade level Type of Assessments _____ _____ _____	Student <input type="checkbox"/> Completes work quickly & accurately <input type="checkbox"/> Learns with few repetitions <input type="checkbox"/> Uses time wisely <input type="checkbox"/> Completes long-term assignments <input type="checkbox"/> Demonstrates self-motivation	<input type="checkbox"/> Differentiated Assignments <input type="checkbox"/> Compacting Curriculum <input type="checkbox"/> Higher-order Thinking & Questioning Strategies <input type="checkbox"/> Independent Study/Research Project Description/Comments _____ _____ <input type="checkbox"/> No modifications needed at this time. Student performance will continue to be monitored

	LEVEL OF LEARNING (List type of assessment.)	RATE OF LEARNING (Check all that apply for each subject.)	DIFFERENTIATED INSTRUCTION AND STRATEGIES (Check all that apply for each subject.)	
SOCIAL STUDIES	<input type="checkbox"/> Above grade level <input type="checkbox"/> At grade level <input type="checkbox"/> Below grade level Type of Assessments <hr/> <hr/> <hr/>	Student <input type="checkbox"/> Completes work quickly & accurately <input type="checkbox"/> Learns with few repetitions <input type="checkbox"/> Uses time wisely <input type="checkbox"/> Completes long-term assignments <input type="checkbox"/> Demonstrates self-motivation	<input type="checkbox"/> Differentiated Assignments <input type="checkbox"/> Compacting Curriculum <input type="checkbox"/> Higher-order Thinking & Questioning Strategies <input type="checkbox"/> Independent Study/Research Project <hr/> Description/Comments _____ <hr/> <input type="checkbox"/> No modifications needed at this time. Student performance will continue to be monitored	<input type="checkbox"/> Cluster/Flexible Grouping <input type="checkbox"/> Individual Instruction <input type="checkbox"/> Acceleration <input type="checkbox"/> Extension Activities <input type="checkbox"/> Other _____ <hr/> <hr/>
	SCIENCE	<input type="checkbox"/> Above grade level <input type="checkbox"/> At grade level <input type="checkbox"/> Below grade level Type of Assessments <hr/> <hr/> <hr/>	Student <input type="checkbox"/> Completes work quickly & accurately <input type="checkbox"/> Learns with few repetitions <input type="checkbox"/> Uses time wisely <input type="checkbox"/> Completes long-term assignments <input type="checkbox"/> Demonstrates self-motivation	<input type="checkbox"/> Differentiated Assignments <input type="checkbox"/> Compacting Curriculum <input type="checkbox"/> Higher-order Thinking & Questioning Strategies <input type="checkbox"/> Independent Study/Research Project <hr/> Description/Comments _____ <hr/> <input type="checkbox"/> No modifications needed at this time. Student performance will continue to be monitored

PARENT CONTACT		END OF YEAR SUMMARY		
Parents are invited to contact their child's teacher at any time with questions or input regarding the TAG Planning Worksheet.		Math Reading Writing Social Studies Science	<input type="checkbox"/> Above grade level <input type="checkbox"/> At grade level <input type="checkbox"/> Below grade level Comments:	
Initial Contact _____ Date Early fall OR within three weeks after initial identification Parent Initials	<input type="checkbox"/> Above grade level <input type="checkbox"/> At grade level <input type="checkbox"/> Below grade level Comments:			
Fall Conference _____ Date Copy of TAG Planning Worksheet provided to parent. Parent Initials	<input type="checkbox"/> Above grade level <input type="checkbox"/> At grade level <input type="checkbox"/> Below grade level Comments:			
Spring Conference _____ Date Copy of completed TAG Planning Worksheet mailed to parent Parent Initials	<input type="checkbox"/> Above grade level <input type="checkbox"/> At grade level <input type="checkbox"/> Below grade level Comments:			
	<input type="checkbox"/> Above grade level <input type="checkbox"/> At grade level <input type="checkbox"/> Below grade level Comments:			



CENTENNIAL SCHOOL DISTRICT
K – 6 TAG Planning Sheet
Vocabulary and Teacher Comment Sheet

