



## **REQUEST TO EXIT GIFTED AND TALENTED PROGRAM**

Student Name \_\_\_\_\_ Birthdate \_\_\_\_\_ ID # \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

School \_\_\_\_\_ School # \_\_\_\_\_ Grade \_\_\_\_\_

### **Reason for Exit – Please check all that apply:**

\_\_\_\_ Rigorous Academic Instruction – child cannot maintain pace of program

\_\_\_\_ District Transportation Not Provided – school is too far from home

\_\_\_\_ Siblings are at home school

\_\_\_\_ Other \_\_\_\_\_

### **For Academic and Behavioral Reasons, please provide the following documentation:**

#### **Communication with parent/guardian:**

1. List dates of phone contact \_\_\_\_\_

\_\_\_\_\_

2. List dates of face-to-face meetings \_\_\_\_\_

\_\_\_\_\_

3. List dates/types of written communication \_\_\_\_\_

\_\_\_\_\_

#### **Intervention Strategies:**

1. List intervention strategies, dates in effect and who implemented them (or attach a copy).

\_\_\_\_\_

\_\_\_\_\_

2. List behavior strategies or attach a copy of the behavioral contract, if one was utilized. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Attach report card grades and progress reports for last two years.

**Contact Parents, Principal, all Teachers involved and Gifted Coordinator to arrange an 'Exit Meeting.'**

**Date of Meeting** \_\_\_\_\_

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**EXIT MEETING**

Date of Meeting \_\_\_\_\_

Student Name: \_\_\_\_\_ ID # \_\_\_\_\_

Results of Exit Meeting: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent Signature \_\_\_\_\_

Principal Signature \_\_\_\_\_

Teacher Signature \_\_\_\_\_

Gifted Coordinator \_\_\_\_\_

Other \_\_\_\_\_ Title \_\_\_\_\_

Other \_\_\_\_\_ Title \_\_\_\_\_