



Northwest Georgia RESA

Gifted Endorsement Program Advisement Sheet

Candidate Name _____ Program Admission Date _____

Gifted Endorsement Program Admission Requirements

	Date(s)	Verification (initials)
Baccalaureate degree from an accredited college/university with a minimum of 2.0 GPA		
Valid T-4 or higher Clear Renewable certificate Please list areas of certification: _____ _____	Date Submitted _____	_____
Completed Endorsement Candidate Application Form	Date Submitted _____	_____
Verification by district human resource department of two or more years of successful teaching experience (included on Endorsement Candidate Application Form)	Date Submitted _____	_____
Two letters of recommendation, one of which must be from the applicant's school-based administrator	Date Submitted _____	_____
Completed Teacher Candidate Dispositions Record (which includes a written Philosophy of Instruction and Goals)	Date Submitted _____	_____

Course I: Characteristics of Gifted Students

PL# _____

Case Study	Date Submitted _____	_____
Article Reviews (5)	Date(s) Submitted _____	_____
Movie Assignment	Date Submitted _____	_____
Special Population Presentation	Date Submitted _____	_____
Creativity Strategy	Date Submitted _____	_____
End of Course Performance Task	Date Submitted _____	_____

Course II: Methods and Materials for Teaching the Gifted

PL# _____

Interdisciplinary Unit Outline	Date Submitted _____	_____
Article Reviews (5)	Date(s) Submitted _____	_____
Resident Expert Presentation	Date Submitted _____	_____

Differentiation Project	Date Submitted _____	_____
Teacher Observation and Interview	Date Submitted _____	_____
End of Course Performance Task	Date Submitted _____	_____
Completed Teacher Candidate Dispositions Record (does not include philosophy and goals)	Date Submitted _____	_____

Course III: Assessment of Gifted Students

PL# _____

Interdisciplinary Unit Culminating Performance Task	Date Submitted _____	_____
Test Blueprint	Date Submitted _____	_____
Culminating Performance Task Rubric	Date Submitted _____	_____
Portfolio Assessment	Date Submitted _____	_____
Identification Process Brochure	Date Submitted _____	_____
Gifted Eligibility Report Analysis	Date Submitted _____	_____
Assessment Review	Date Submitted _____	_____

Course IV: Curriculum and Program Development for the Gifted

PL# _____

Interdisciplinary Unit Lesson Plans and Implementation (Clinical Practice)	Date Submitted _____	_____
Research Paper on Delivery Models	Date Submitted _____	_____
Powerpoint or Brochure on Curriculum Models	Date Submitted _____	_____
Lesson Observation and Reflection (Self and Instructor Review) (Clinical Practice/ Field Experience)	Date Submitted _____	_____
Peer Reviews (Field Experience)	Date Submitted _____	_____
Program Analysis	Date Submitted _____	_____
Completed Teacher Candidate Dispositions Record (which includes a written Philosophy of Instruction and Goals)	Date Submitted _____	_____

Endorsement Culminating Performance Task

Date Submitted _____