

BODY OF EVIDENCE FORM

STUDENT DATA

Student Name:

Date:

Date of Birth:

Grade Level:

COGNITIVE ABILITY (put age percentile score in the appropriate box)

Test Name	Test Date	Verbal	Quantitative	Non-Verbal	Composite	Other

CHARACTERISTIC AND BEHAVIOR (divide total points/total points possible)

Test Name	Test Date	Category/Subtest	Completed by:	Percentage	Achievement Area

ACADEMIC ACHIEVEMENT

Two scores are needed in this section to populate final outcomes. Use percentiles except for TCAP.

Test Name	Test Date	Math	Reading	Writing	Science	Other
TCAP/PARCC/CMAS						
TCAP/PARCC/CMAS						

A – Art, C – Creativity, D – Drama, L – Leadership, LA – Language Arts, M – Math, MLA – Math and Language Arts, MU – Music, NV – NonVerbal, S – Science, Other - O

PORTFOLIO OR RUBRIC GRADED WORK

The first two rows are for rubric style grading. The third is for regular percentage grading.

Activity Description	Activity Date	Rubric/ Graded	Score	Achievement Area
<i>Ohio Rubric</i>		<i>Rubric</i>		
		<i>Rubric</i>		
		<i>Percentage</i>		

CONTEST/COMPETITION

(list the highest level that student achieved placing in)

Event Description	Event Date	Level of Competition	Placing	Achievement Area

OTHER (detail any other relevant factors that were considered)

OUTCOMES

Specific Academic Aptitude	Outcomes	Specific Talent Aptitude	Outcomes
Reading		Visual Arts	
Writing		Performing Arts	
Mathematics		Musical Abilities	
Science		Dance	
Social Studies		Psychomotor Abilities	
World Languages		Creative or Productive Thinking	
		Leadership Abilities	

This student was: Identified as Gifted (ALP attached)
 Placed in Talent Pool
 Recommended for Reevaluation on _____ (date)