



Miami-Dade County Public Schools
Division of Advanced Academic Programs
Projected Request for Senior High School Gifted Units/Supplements
20 ____ - 20 ____



School: _____ **Location #:** _____ **Regional Center:** _____

Total number of eligible gifted students _____
 Number of eligible gifted students taking one class _____
 Number of eligible gifted students taking two classes _____
 Number of eligible gifted students taking three or more classes _____
 Number of minutes per class period _____
 Total number of eligible gifted students participating in the Consultation Model _____

List all projected gifted classes. Do not include classes containing advanced and gifted students during the same period with the same teacher and different course code numbers. A heterogeneous class does not generate gifted funding and may not be designated as a gifted class.

The final allocation of gifted units/supplements is based on the gifted FTE generated and the number of open gifted sections.

Title of Course Scheduled	Grade Level	Class Period	Class Enrollment	Teacher's Name		Indicate	
				Last	First	Endorsed	Waiver*
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

*** Principals must request a waiver for each non-endorsed instructor teaching a gifted class. Teachers at Title I schools must meet Highly Qualified Teacher (HQT) requirements; therefore, waivers will not be authorized.**

Total Supplements Requested _____		Total 6790 Units Requested** _____	
Principal _____	Date _____	Regional Center Administrative Director _____ Business/Personnel	Date _____

**** Five supplements yield one unit. The instructor placed in the unit must teach five gifted classes.**

FOR DISTRICT OFFICE USE ONLY	
FTE Generated _____	Gifted Sections Opened _____
Projected 6790 Gifted Units _____	Projected Gifted Supplements _____
DAAP Staff Initials: _____ Date: _____	