



**Berkeley Heights**  
**Gifted and Talented Education Complaint Procedure**  
**Information, Complaint Form, and Checklist**

Overview:

*New Jersey Administrative Code 6A:8-3.1* defines students who are gifted and talented as those students who possess or demonstrate high levels of ability in one or more content areas when compared to their chronological peers in the local district and who require modification of their educational program if they are to achieve in accordance with their capabilities. According to *N.J.A.C. 6A:8-3.1*, all public school districts must have a board-approved gifted and talented identification process and provide services for identified students enrolled in the grades of that school district. The regulations require that identification and services be made available to students in grades K-12.

The “Strengthening Gifted and Talented Education ” law (18A:35-35) codifies requirement included in State Board of Education regulations that boards of education ensure that appropriate instructional adaptations and educational services are provided to gifted and talented students in kindergarten through grade 12 to enable them to participate in, benefit from, and demonstrate knowledge and application of the New Jersey Student Learning Standards.

NJDOE Statutes and Regulations:

<https://www.state.nj.us/education/aps/cccs/gandt/regs.htm>

Complaint Procedure:

1. The complainant/appealing party may utilize this procedure to resolve a concern.
2. The appealing party shall submit to the school in writing the specific concern, using the form found below (pg. 2).

3. The school shall notify the GT teacher and the District GT Coordinator of the grievance.
4. The Gifted/Talented District Coordinator and the GT teacher shall compile a student profile and present that along with the petition to a Grievance Committee consisting of a regular education teacher of the student, a gifted education teacher and/or GT Coordinator, and a school administrator. The profile shall include a recommendation with substantiating evidence from the child's current and previous teachers. Criteria for determining appropriate placement of the student shall follow the NJDOE and Berkeley Heights Gifted & Talented Education regulation guidelines.
5. The Committee shall hear grievance appeals within the instructional quarter/semester in which the grievance occurs, whenever possible. The Committee shall then make a recommendation for action or non-action on behalf of the concern, and discuss that recommendation with the appealing party in a scheduled meeting. Should the appealing party not be the parent/guardian, the parent/guardian shall also be informed of the meeting date.
6. If the resultant action is that the student should be administered additional testing to determine eligibility for specified services, the parent/guardian will be asked to sign a permission form for the additional testing.
7. If the resultant action is that the student will now be eligible for the specified GT services, he/she may begin receiving services as soon as the parent/guardian signs for permission to serve.
8. If the resultant action is that a modification in services is needed, these modifications will begin as soon as all parties involved have been informed of the changes.
9. If the resultant action is that the student is determined to be not eligible for formal GT services, a written appeal may be made to the Assistant Superintendent of Schools.
10. Should the Assistant Superintendent uphold the decision, the appealing party may petition the Superintendent of Schools.
11. Should the Superintendent uphold the decision of the Committee, the appealing party may petition the Board of Education, which shall have the final decision in the case.



**Berkeley Heights  
Gifted and Talented Complaint Form**

<b>Complainant Name:</b>	
<b>Date of Complaint:</b>	
<b>Relation to student: (Parent, Gifted Intervention Specialist, Teacher, etc.)</b>	
<b>Address:</b>	
<b>Phone Number (Work):</b>	
<b>Phone Number (Home)</b>	
<b>Phone Number (Cell):</b>	
<b>Email Address:</b>	
<b>Student's Name:</b>	
<b>Student's Grade:</b>	
<b>Student's Homeroom Teacher:</b>	
<b>Description of the issue, including facts your complaint is based on:</b>	



**Berkeley Heights  
 Gifted and Talented Complaint Checklist (for district use)**

<b>Student:</b>	
<b>School:</b>	
<b>Grade:</b>	
<b>Homeroom Teacher:</b>	
<b>Appeal submitted in written form to:</b>	
<b>Date received:</b>	
<b>Parent permission given in written form for additional testing; date received:</b>	
<b>Test(s) administered:</b>	
<b>Additional student data collected:</b>	
<b>Committee Meeting held; date:</b>	
<b>Committee Decision and rationale:</b>	
<b>Parent Decision (accepted or appealed):</b>	
<b>Appeal steps noted (Assistant Superintendent, Superintendent, and/or BOE) and final decision made:</b>	