



**PARENT/GUARDIAN INFORMATION SURVEY**

Data about potentially gifted students collected from outside school settings and from parents can provide information that may be unknown or unobserved by teachers in an educational setting. Parent information about the student and his or her capabilities at home and in the community can be invaluable when accompanied by examples.

Student Name \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

**DIRECTIONS:** If your child has special talents or interests in any of the areas on this form, please fill them out. Fill out only categories which fit your child. Thank you for your help.

My child:

❖ 1. Fixes things: \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, what kinds of things? \_\_\_\_\_

\_\_\_\_\_

How long has he/she done this? \_\_\_\_\_

Can you remember (and tell us) any stories about your child fixing things? Or send a sample to school? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

❖ 2. Makes things: \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, what kinds of things? \_\_\_\_\_

\_\_\_\_\_

How long has he/she done this? \_\_\_\_\_

Can you remember (and tell us) any stories about your child making things? Or send an example to school? What is it? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

❖ 3. Collects things: \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, what kinds of things? \_\_\_\_\_

\_\_\_\_\_

How long has he/she done this? \_\_\_\_\_

\_\_\_\_\_

Can you remember (and tell us) any stories about your child making things? Or send an example to school? What is it? \_\_\_\_\_

❖ 4. Writes things: \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, what kinds of things? \_\_\_\_\_

How long has he/she done this? \_\_\_\_\_

Do you have any samples you can send to school? \_\_\_\_\_

❖ 5. Reads a lot: \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, what does he/she read? \_\_\_\_\_

❖ 6. Plays a musical instrument: \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, which instrument(s)? \_\_\_\_\_

How long has he/she played this instrument? \_\_\_\_\_

❖ 7. Performs in plays: \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, for how long? \_\_\_\_\_

Please explain \_\_\_\_\_

❖ 8. Dances: \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, how long has he/she danced? \_\_\_\_\_

❖ 9. Sings: \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, how long has he/she been singing? \_\_\_\_\_

Please explain \_\_\_\_\_

❖ 10. Creates visual art: \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, what medium does your child prefer to utilize? \_\_\_\_\_

Are there examples to send to school? \_\_\_\_\_

❖ 11. Is really interested in what? \_\_\_\_\_

❖ 12. Something that has not been mentioned about my child: \_\_\_\_\_

Adapted by Ann Winer from Jane Piirto's book, *Talented Children and Adults*.

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