

PINELLAS COUNTY SCHOOLS
GIFTED CONSIDERATION PARENT/GUARDIAN QUESTIONNAIRE

Child's Name: _____ **School:** _____ **Grade:** _____ **Date:** _____

The information you provide is important and may show evidence that your child exhibits some gifted characteristics and may need additional programming beyond the general education curriculum. Observations from a parent/guardian can provide information that may be unknown or unobserved by teachers in the educational setting. These observations can also give insight to your child's strengths and interests.

Please give an example for each: (you may skip any that do not apply)

An example of how my child surprises me with his/her knowledge:

An example of how my child comes up with imaginative and/or unusual ways of doing things:

An example of how my child is intellectually curious and asks thoughtful questions:

An example of how my child finds humor in situations or events unusual for his/her age:

An example of how my child can focus on a particular topic for an unusually long period of time:

An example of how my child is a collector:

My child's favorite part of school is:

Please add any other information that you think would help us to know more about your child and his/her strengths and/or areas of interest:

Please list the address you would like your child's gifted eligibility determination sent to: