

Garfield School District

Parent/Guardian Questionnaire

OPTIONAL

Student _____ School Currently Attending _____ School Year _____ Grade _____

Please print clearly or type; responses must fit on this form. Additional information may be submitted up to five pages.

Check the appropriate box: **occasionally, frequently, or consistently.**
Give an example of each.

Occasionally	Frequently	Consistently
--------------	------------	--------------

My child surprises me with his/her knowledge

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

My child comes up with imaginative and/or unusual ways of doing things.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

My child is intellectually curious and asks thoughtful questions.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

My child finds humor in situations or events unusual for his/her age.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

My child can focus on a particular topic for an unusually long period of time.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

Does your child have a special need that you want to communicate to the committee? NO YES

If YES, please explain (such as learning disability). Additional information may also be submitted as part of the five pages.

Parent/Guardian Signature

Date

Garfield School District Highly Capable Program

Please print clearly in black or blue ink only.

Student's **Legal** Name: _____

Current School: _____ Current Grade Level _____

Teacher's Name: _____ Signature: _____ Date: _____

For each statement, check the work that best describes the student. Please site specific examples.

A. The student is an intense learner. This is demonstrated through

*Almost
Always Often Seldom*

1. _____ ☐ ☐ ☐ determination to complete assignments and projects successfully.
2. _____ ☐ ☐ ☐ using advanced vocabulary, incorporating it into conversation or writing.
3. _____ ☐ ☐ ☐ possessing a large amount of factual knowledge used accurately, reading extensively.
4. _____ ☐ ☐ ☐ social awareness, concern for fairness, prejudice, and equity issues beyond age level.
5. _____ ☐ ☐ ☐ exploring topics of personal interest beyond age level, becoming totally absorbed in an area of particular interest.

Examples: _____

B. The student is an analytical thinker. Analytical thinking is demonstrated through

*Almost
Always Often Seldom*

6. _____ ☐ ☐ ☐ an understanding of ideas and complex concepts.
7. _____ ☐ ☐ ☐ an interest in challenging situations, approaching problems from different perspectives, tackling difficult problems and issues which others may find frustrating.
8. _____ ☐ ☐ ☐ learning new skills and concepts quickly.
9. _____ ☐ ☐ ☐ an awareness of relationships, using metaphors or analogies, making mental connections.
10. _____ ☐ ☐ ☐ a willingness to take risks, showing confidence in answers and willing to support a different idea or opinion.

Examples: _____

C. The student is a creative producer. Creative, productive thinking is demonstrated through

Almost
Always *Often* *Seldom*

11. _____ generating different ideas, adapting readily to new situation.
12. _____ originality, expressing familiar ideas in unusual ways, offering unique situations to problems or questions, creating original products.
13. _____ creating detailed projects, turning the simple into complex, adding details, embellishing.
14. _____ questioning, asking complex questions not typical of age group.
15. _____ a sense of humor reflecting advanced understanding, seeing humor in situations others find humorless.

Examples: _____

D. The student is highly motivated in areas of interest. Motivation is demonstrated through

Almost
Always *Often* *Seldom*

16. _____ working well independently.
17. _____ exceeding expectations, doing more than what is required on assignments of interest.
18. _____ working cooperatively as a team member, receptive to the ideas of others.
19. _____ eagerness to complete assignments of interest on time to prior to due date.
20. _____ assuming leadership positions, leading the group.

Examples: _____

Addition Comments: Please be as specific as possible in commenting on any characteristics, abilities, and/or aptitudes of this student that you feel should be brought to the attention of the Identification of Placement Committee.

[illegible]

Garfield School District

Parent Information Form

Grades _____

Please print in black or blue ink only.

Students **Legal** Name: _____ Date of Birth: ____/____/____

Parent/Guardian Name(s): _____

Street Address: _____ City: _____ Zip Code: _____

Home Telephone: _____ Other Telephone: _____

School: _____ Grade: _____ Teacher: _____

I would like my child considered for gifted program services. I understand that the testing will be completed by the assessment team and/or school psychologist.

Signature: _____ Date: _____

For each statement, check the work that best describes the student. Please site specific examples.

A. My child is an intense learner. This is demonstrated through

*Almost
Always Often Seldom*

1. _____ determination to complete assignments and projects successfully.
2. _____ using advanced vocabulary, incorporating it into conversation or writing.
3. _____ possessing a large amount of factual knowledge used accurately, reading extensively.
4. _____ social awareness, concern for fairness, prejudice, and equity issues beyond age level.
5. _____ exploring topics of personal interest beyond age level, becoming totally absorbed in an area of particular interest.

Examples: _____

B. My child is an analytical thinker. Analytical thinking is demonstrated through

*Almost
Always Often Seldom*

6. _____ an understanding of ideas and complex concepts.
7. _____ an interest in challenging situations, approaching problems from different perspectives, tackling difficult problems and issues which others may find frustrating.
8. _____ learning new skills and concepts quickly.
9. _____ an awareness of relationships, using metaphors or analogies, making mental connections.
10. _____ a willingness to take risks, showing confidence in answers and willing to support a different idea or opinion.

Examples: _____

C. My child is a creative producer. Creative, productive thinking is demonstrated through

Almost
Always *Often* *Seldom*

11. _____ generating different ideas, adapting readily to new situation.
12. _____ originality, expressing familiar ideas in unusual ways, offering unique situations to problems or questions, creating original products.
13. _____ creating detailed projects, turning the simple into complex, adding details, embellishing.
14. _____ questioning, asking complex questions not typical of age group.
15. _____ a sense of humor reflecting advanced understanding, seeing humor in situations others find humorless.

Examples: _____

D. My child is highly motivated in areas of interest. Motivation is demonstrated through

Almost
Always *Often* *Seldom*

16. _____ working well independently.
17. _____ exceeding expectations, doing more than what is required on assignments of interest.
18. _____ working cooperatively as a team member, receptive to the ideas of others.
19. _____ eagerness to complete assignments of interest on time to prior to due date.
20. _____ assuming leadership positions, leading the group.

Examples: _____

Additional Comments: Please be as specific as possible in commenting on any characteristics, abilities, and/or aptitudes of this student that you feel should be brought to the attention of the Identification of Placement Committee.

[illegible]

Garfield School District

Highly Capable Program Referral Form

PLEASE PRINT

Please type or print clearly. Responses must fit on the form; attachments may not be submitted.

Student's Last Name	First Name	Parents/Guardians	
Date of Birth	Gender	Grade	Home Address
School Attending	Telephone #		City/State/Zip
Classroom Teacher's Name		Telephone Mother (H)	Mother (W) Mother (C)
Highly Capable Program Coordinator		Telephone Father (H)	Father (W) Father (C)

Language(s) spoken at home _____

In the space provided below, please explain why the student should be considered for Highly Capable Program services.

Signature of Referral Source

Relationship to Student

Date of Referral

Garfield School District

GIFTED EDUCATION K-12 APPEAL/REVIEW REQUEST FORM

Current Date: _____

Students Legal Name: _____
Last First MI

Address: _____
Street City Zip Code

School: _____ Grade: _____ Teacher: _____

Parent's Name: _____
Last First MI

Person requesting this appeal (signature): _____

Person requesting this appeal (print): _____

Relationship to the child: _____

Address: _____
Street City Zip Code

Telephone: _____

Please include a detailed written explanation as to why the appeal is being filed including specific new information that might impact the decision by the committee. Any additional assessments must be initiated by the committee and administered by Garfield School District.

Return to:

The appeals request will be revised by a committee knowledge about Highly Capable Program services and chaired by the school principal. The committee decision will be sent in writing to the person filing the appeal.