

## Talented and Gifted Program Parent Nomination Checklist

Student Name: Last	First	MI
Language Spoken at Home	Phone Number	Birth Date
Parent Name	E-mail Address	
Street Address	City	Zip
School	Teacher	

I give permission to Ferndale School District to collect additional information about my child. I also give permission for my child to be served in the Talented and Gifted Program if he/she is identified for placement.

Parent/Guardian Signature	Date
---------------------------	------

**DIRECTIONS: Circle the number that best describes your child:**

- 4 = My child demonstrates this trait most of the time.
- 3 = My child demonstrates this trait frequently.
- 2 = My child rarely demonstrates this trait.
- 1 = My child does not have this trait.



If you circle 3 or 4 please give an example to explain your response

### RETURN TO THE MAIN OFFICE AT YOUR CHILD'S SCHOOL

1. Questions friends and family on many different subjects.	1	2	3	4
2. Creates original stories	1	2	3	4
3. Enjoys hearing stories and looking at books	1	2	3	4

--- PLEASE SEE BACK SIDE ---

4. Sticks to a task once it is begun.	1	2	3	4
5. Solves daily problems in many different ways.	1	2	3	4
6. Shows active interest in the world around him/her.	1	2	3	4
7. Has interests of older children or adults in games and/or reading.	1	2	3	4
8. Questions "how?" and "why?"	1	2	3	4
9. Shows awareness of problems others may not recognize.	1	2	3	4
10. Cooperates with other children.	1	2	3	4
11. Plans and/or organizes when playing with others.	1	2	3	4
12. Is mature beyond his/her years either physically, mentally, or emotionally.	1	2	3	4
13. Chooses to try challenging/complex problems or projects.	1	2	3	4
14. . Reads books independently. (Please list titles of books.)	1	2	3	4
15. Enjoys discovering about numbers.	1	2	3	4