

Appendix D  
*Dawson County Schools*  
**Gifted Education Program**  
**Parent Referral**

Student's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Date: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Name of Parent or Guardian Making Referral: \_\_\_\_\_

Address: \_\_\_\_\_

A. What special talents or skills does your child have?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Give examples of behavior that illustrate this.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

B. Check the following items that best describe your child as you see him or her.

	Little	Some	A Great Deal
1. Is alert beyond his years			
2. Likes learning			
3. Has interests of older children or of adults in games and reading			
4. Sticks to a project once it is started			
5. Is observant			
6. Has lots of ideas to share			
7. Knows many different ways of solving problems			
8. Is aware of problems others often do not see			
9. Uses unique and unusual ways of solving problems			
10. Wants to know how and why			
11. Likes to pretend			
12. Other children call him/her to initiate play activities			
13. Asks a lot of questions about a variety of subjects			
14. Is concerned with details			
15. Enjoys and responds to beauty			
16. Is able to plan and organize activities			
17. Has above average coordination, agility, and ability in organized games			
18. Often finds and corrects own mistakes			
19. Others seem to enjoy his/her company			
20. Makes up stories and has ideas that are unique			

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	Little	Some	A Great Deal
21. Has a wide range of interests			
22. Gets other children to do what he/she wants			
23. Likes to play organized games and is good at them			
24. Enjoys other people and seeks them out			
25. Is able and willing to work with others			
26. Sets high standards for self			
27. Chooses difficult problems over simple ones			
28. Is able to laugh at self (if necessary)			
29. Likes to do many things and participates whole-heartedly			
30. Likes to have his/her ideas known			

C. Reading interests: (favorite type of books and/or titles of favorite books)

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D. Favorite school subject:

E. General attitude toward school:

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F. Favorite playtime, leisure time activity: \_\_\_\_\_

G. Hobbies and special interests: (collections, dancing, making models, swimming, singing, painting, cooking, sewing, drama, etc.)

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H. What special lessons, training, or learning opportunities does your child have outside of school?

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I. What are some of the influences at home or at school that may negatively influence your child's performance in school?

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J. What other things would you like us to know that would assist us in planning a program for your child?

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