



## Parent Consent and Questionnaire for GATE Assessment

Date:							
Dear Parent or Guardian,							
Thank you for identifying your child,, as a potential candidate for the Middleton School District Gifted and Talented Education (GATE) Program. This letter is to seek your permission to undergo further assessment to determine possible eligibility.							
higher than average test scores a	nd/or observed gifted behavi er cognitive ability and acade	e and qualitative data points including ors in your child. We would like your mic achievement assessments. If your d parent questionnaire as well.					
Feel free to contact me for further	r information.						
Sincerely,							
GATE Facilitators							
Permission is given to asse Permission is denied at this	·						
Signature							
Parent(s) names							
Mailing Address							
Mother: home phone	work phone	cell phone					
Father: home phone	work phone	cell phone					
Preferred email address							
Please return this form to the sch	ool office.						

## **Parent Questionnaire**

Student Name:	

The following list of characteristics represents traits generally found in gifted and talented students. Please complete this checklist for your child:

	Seldom			Almost
Characteristics:	or never	Occasionally	Frequently	Always
Develops unevenly, meaning that some areas show				
advanced development, but not others (i.e., early				
talking and high levels of vocabulary, yet normal or				
lagging physical development, early understanding				
of mathematical concepts, yet emotionally				
immature).				
Is oversensitive physically, emotionally, sensorily,				
intellectually, or imaginationally.				
Begins school with an abundance of knowledge and				
often complains of being bored; this can lead to				
behavior issues at school.				
Is an excellent problem solver, inventing his or her				
own strategies and solutions.				
Overthinks or analyzes seemingly simple tasks and				
requires additional time for task completion (i.e.,				
cleaning room, getting in car, eating food).				
Is idealistic and resists unfairness in any form (i.e.,				
household rules, play with friends, or global issues				
and problems).				
Struggles to connect socially with same-age				
children. Prefers older or adult friends.				
Displays lack of motivation and effort in school, yet				
intensely pursues own learning interests and				
passions independently.				
Has perfectionistic tendencies (i.e. is highly self-				
critical of work, perceives anything less than				
"perfect" as failure, is highly controlling in play or in				
the way things must be done).				

1. Explain why the Gifted and Talented Education (GATE) Program might be appropriate for your child.

2. Describe any special interests, talents or projects your child pursues independently.	
3. List your child's academic and/or social challenges (if any).	
4. Describe any sensitivities your child displays.	
5. Please add any additional information you would like us to know about your child.	
6. If your child qualifies for GATE services, how can the program help your child?	