

### Parent/Guardian Inventory/Interview

Student Name: \_\_\_\_\_ Person Completing Form: \_\_\_\_\_ Date: \_\_\_\_\_

The perceptions and observations of parents/guardians can provide valuable information about a student’s potential and ability in school. School personnel may assist parents/guardians in completing this form.

**Directions:** Use this chart to record specific examples of your child’s traits, aptitudes, and behaviors that you have observed. Record examples that you think are advanced or unusual for a child of this age and how you feel this might impact, enhance, or benefit the school experiences of your child. It is not necessary to complete all rows.

<b>Traits, Aptitudes, and Behaviors</b>	<b>How does your child show this characteristic? Please share examples.</b>	<b>How might this affect your child’s school experience?</b>
<b>Motivation / Task Commitment</b>		
<b>Interests</b>		
<b>Communication</b>		
<b>Problem-Solving</b>		
<b>Memory</b>		
<b>Curiosity/ Inquisitiveness</b>		

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Traits, Aptitudes, and Behaviors	How does your child show this characteristic? Please share examples.	How might this affect your child's school experience?
Insight		
Sensitivity		
Humor		
Intensity		
Interpersonal		
Intrapersonal		
Creativity		
Reasoning		