
Last Name, First Name (PLEASE PRINT)

State University of New York at Buffalo
GIFTED MATH PROGRAM
NOMINEE QUESTIONNAIRE

Please fill out this questionnaire carefully and completely. The information you provide will help us in learning about you and your interests. Use your own words and write **with pen** as legibly as possible. Be sure to respond to all questions. We are particularly interested in your answers to the questions in part VI. Your responses will be kept confidential.

Please bring this completed questionnaire with you when you come to take the entrance test. It will serve as your admission ticket.

I. GENERAL INFORMATION (PLEASE PRINT)

Name: (last) (first) (middle)

Address: (number) (street)

(city) (state) (zip)

Home telephone number Date of Birth M F
Gender

Parents' or guardians' names (e.g., Mr. John and Mrs. Sally Smith)

Emergency Contact Relationship (neighbor, aunt, etc.) Phone Number

Name of school you now attend Student's Current School Grade

Name of school you will attend in September Your Grade in September

School Address

LEARNING ACCOMODATIONS (We do need to know about any specific learning concerns you have in order to respond adequately.):

II. FAMILY:

Number of older brothers _____ Ages: _____

Number of older sisters _____ Ages: _____

Number of younger brothers _____ Ages: _____

Number of younger sisters _____ Ages: _____

Father's* occupation and work address: _____

Mother's* occupation and work address: _____

Any clarifying comments you wish to make about family: _____

III. GENERAL ACADEMIC

Please check the box that best describes your attitude toward each:

	strong liking	moderate liking	neutral	moderate disliking	strong disliking
School					
Mathematics					
Reading and Language Arts					
Science					
Social Studies					
Foreign Language(s)					

Clarifying Comments: _____

Average minutes daily spent at home on schoolwork (circle):

0-10 min

11-30 min

31-60 min

more than 60 min

* Father or mother may be step-father or step-mother. Include their names only if different from those named in Part I.

IV. MATHEMATICS

How do you think that you best learn mathematics?

_____ From teachers

_____ From other students

_____ From texts or other books

_____ Other. Explain: _____

Do you ever read about or study mathematics or science on your own? _____

If so, explain: _____

V. FUTURE OCCUPATION AND STUDIES

List three occupations (e.g., astronaut, teacher of Spanish, business manager) that appeal to you most for your life work. Be specific and order them, number 1 most preferred.

1. _____

2. _____

3. _____

Name, in order of preference, three colleges you might consider for future study. (There is no requirement that you include SUNY at Buffalo.)

1. _____

2. _____

3. _____

VI. In this section we want not only to learn more about you but also to see how well you can organize your thoughts. Please use paragraph form to answer. You may use a word processor to respond to the following questions. You may also hand write your answers.

(continued on next page)

A. READING

What are your reading habits? How much time do you spend reading outside of school? What do you read - books, magazines, comics, newspapers? What do you enjoy reading most? least? Do you like to discuss what you have read? If so, with whom? If you don't enjoy reading at all, tell why. Respond to these and other thoughts you have about your personal reading.

- B. Why would you like to participate in this Gifted Math Program? Include in your response a description of your present school mathematics course and what you like and dislike about it.

C. ASPIRATIONS

Tell us more generally about yourself: what you are like; what are your hopes, interests, experiences, achievements, and future goals; how you get along with others. Try to include here things about yourself that you have not had the opportunity to express in other parts of this questionnaire.

BRING THIS COMPLETED QUESTIONNAIRE TO THE

TESTING SESSION.