



# 2012 Young Child Summer Enrichment Program

July 9-20, Monday-Friday

For High-Ability Learners Ages 4 through 9

University of Northern Colorado  
Young Child Summer Enrichment Program  
Center for the Education & Study of  
Gifted, Talented, Creative Learners  
McKee Hall 29, Campus Box 141  
Greeley, CO 80639  
(970) 351-2683  
E-mail: [sep@unco.edu](mailto:sep@unco.edu)

## APPLICATION

**For All Applicants:** To be completed at home by the PARENT. **Note:** Due to increasing enrollment availability, space limitations will be in effect. In the event of overflow, applicants will be placed on a waiting list and admitted on a first-received basis as space becomes available.

Child's Name \_\_\_\_\_

Child's Age (as of July 2012) Years \_\_\_\_\_ Months \_\_\_\_\_ Birth Date \_\_\_\_\_

Child's Gender \_\_\_\_\_ Child's Grade Level (as of September 2012) \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email address \_\_\_\_\_

Program cost: \$225.00

Credit Card Information: Name on Card \_\_\_\_\_

Visa or MC Card # \_\_\_\_\_ Exp: \_\_\_\_\_

\_\_\_\_\_ **New Applicant (Please complete the PARENT QUESTIONNAIRE)**

\_\_\_\_\_ **Returning Applicant (Do not complete the PARENT QUESTIONNAIRE)**

Years attended (please circle)                      06      07      08      09      10      11

Does your child have any health or safety concerns? \_\_\_\_\_ If so, explain \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**T-shirt size** (please indicate adult or child size) \_\_\_\_\_

## PARENT VOLUNTEERS

Parent volunteers are an asset to our program. If you are interested in being a volunteer, please indicate your availability and interests \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

YOUNG CHILD SUMMER ENRICHMENT PROGRAM  
FOR HIGH ABILITY STUDENTS

PARENT QUESTIONNAIRE

To be completed by parents of **NEW APPLICANTS ONLY** to the Young Child Program.  
(NOTE: If your child is a returning applicant, you do not need to complete the questionnaire.)

Date: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

Child's Name: \_\_\_\_\_

Parent(s): \_\_\_\_\_

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

Child's Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_

School: \_\_\_\_\_

GENERAL INSTRUCTIONS

Parents have opportunities to observe their children's behavior, which no outsider could ever duplicate. This questionnaire is designed to help parent's record and share their observations of their child's everyday behavior and development. The questions cover a broad range of behaviors, which reflect language and other basic intellectual abilities. *All information, which you provide, will be kept confidential.*

1. Please indicate areas of interest and passion for your child (we will use this information to help guide the design of specific class options).
2. What sports or dance experience has your child had, formally or informally (such as family games, swimming lessons, etc.)
3. Describe the kinds of things your child has done which you think might indicate advanced intellectual ability.
4. Does your child excel at art? What kind?

5. Does the child have an unusually long attention span, or does he/she spend a long time doing any one activity, especially a favorite one? Explain.
6. Does he/she have an unusually good memory? Please explain.
7. Are there any intellectual or advanced activities at which your child is better than most? What?
8. Describe any ways in which your child has used language creatively (e.g. writing stories, songs, poems, puns).
9. Does your child come up with unusual excuses for not doing things?
10. Does he/she have a vivid imagination? Explain.
11. How does the child get along with these people:

QUESTION	VERY WELL	NORMAL—O.K.	NOT WELL
Kids of his/her age			
Adults			
Older Children			
Younger Children			
Large Groups			
Small Groups (2-4 kids)			

12. What are your child's favorite activities?
13. List or describe the books your child most enjoys looking at, listening to, or reading.
14. Does he/she have a special sense of fairness, of justice? Share examples
15. Every parent sees special things about his/her child that other people miss. Describe your child.

## RETURN APPLICATION TO:

University of Northern Colorado  
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McKee Hall 29a, Campus Box 141  
Greeley, CO 80639  
Phone: (970) 351-2683  
Fax: (970) 351-1061  
E-mail: [sep@unco.edu](mailto:sep@unco.edu)  
Web site: [www.unco.edu/sep](http://www.unco.edu/sep)

### GENERAL INFORMATION

The Young Child Summer Enrichment Program for high-ability learners is sponsored by the Center for the Education & Study of Gifted, Talented, Creative Learners of the University of Northern Colorado. It is designed for children, ages 4 through 9, who show unusual talents and abilities. The program was initiated in 1980 for these high-potential, high-ability students and continues to be a successful program each year.

Children are identified by professionals and are admitted on the basis of ability, development and achievement. The curriculum incorporates creativity, problem solving and development of high level thinking skills based on student interests and passions.

Young Child SEP is scheduled for **one** two-week session for the summer of 2012. The session will begin on Monday, July 9, 2012 and conclude on Friday, July 20, 2012.

The program will be offered daily from 9 a.m. to noon. The cost is \$225. This price includes a 2012 SEP T-shirt. Completed application with full payment is due by June 1, 2012. If payment is not received by June 1, it will be assumed that your child has decided not to attend this year and your child's space will be filled by another student. A letter of acceptance will be mailed after your child's completed application is reviewed and approved by the program director

**Phone:** (970) 351-2683

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**Web site:** [www.unco.edu/sep](http://www.unco.edu/sep)