Subject Questionnaire

Instruction:

Please answer the following questions before you are interviewed by the researcher. Your answers will assist us in conducting a study of those factors which may affect your academic performance in school. Please feel free to add any additional information which may be useful in giving a clear picture of you and your experiences in school. All information will be treated as STRICTLY CONFIDENTIAL.

This questionnaire may be returned to:

Sally M. Reis
Department of Educational Psychology
The University of Connecticut
Box U-7, 362 Fairfield Road
Storrs, CT 06269

Your Name ____________________________________________________________
Age ____________ Sex ____________ Date of Birth _________________________

Educational level ______________________________________________________

Number of semesters completed ________________________________

College or school in which you are enrolled ______________________________

(Responses to the following questions may be continued on the back of these pages.)

1. Describe your present university program (courses, classes, etc.,)

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2. Were you identified as having a learning disability in school? If so, at what grade level?

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____________________________________________________________________
3. What was the nature of the learning disability?

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4. Were you ever identified as gifted or did you ever think that you were ‘smart’ in certain areas?

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5. Have you ever experienced a period of time during which you did not do well in school? If so, please describe this period of time.

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6. What events and/or persons have had the greatest positive influence on your performance as a student? How did these events and persons enable you to be a better student?

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7. What events and/or persons have had the greatest negative influence on your performance in school? How did these cause you to not do well in school?

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8. What are your career goals?

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Thank you for answering these questions! We’ll be in touch soon to arrange an interview at your convenience.