



All About Me

My name is.....

My Date of Birth is.....

Today's date is.....

My family and friends

I live with.....

I like to call them.....

At home I am looked after by.....

My Mum is called.....

My Dad is called.....

My brothers and sisters are called:-

Name	DOB

My Grandparents are called.....

I like to call them.....

The other members of my family I see a lot are:

.....

My friends that I enjoy playing with are called:

.....

When I come to nursery I will mainly be collected by:-



Eating and Drinking



Some of the things I do not like/ like to eat or drink are:-

Like	Dislike

I am able to use: (please circle)

A cup with a lid

A cup with a handle

A normal beaker

A bottle

I can feed myself now

I need a little help to feed myself

I need lots of help



Self help

The clothes I can put on by myself are:-

I wear a nappy/pull ups

I use a potty/toilet

I go to the toilet by myself/ I need reminding to go

Any other things you want to tell us





Communication

I like to communicate by:

Speaking Sounds Gestures

Signing Pictures

I can hear well/I have some problems with my hearing.

I can see well/ I have some problems with my sight.



Here are a few of my favourite things:

Toy:	Game:
Book:	TV programme:
Food:	Comforter:

Here are some other things I like to do:

Here are some things I don't really like or frighten me a little:

More about myself I want you to know:

(Please include any Allergies, Medication, child protection issues etc)





Here are the names and phone numbers of people you may need to speak too:

<u>Name</u>	<u>Phone No.</u>



Please can you give details of your child's typical daily routine, include mealtimes, quiet times etc, this is so we get a picture of your child's activities:

8.00-9.00am	
9.00-10.00am	
10.00-11.00am	
11.00-12.00pm	
12.00-1.00pm	
1.00-2.00pm	
2.00-3.00pm	
3.00-4.00pm	
4.00-5.00pm	
5.00-6.00pm	



This is how I spend my week and who I like to spend it with.

	Morning	Afternoon	Evening
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			



THANK YOU FOR TAKING YOUR TIME TO FILL
THIS OUT, WE NOW HAVE A GREAT PICTURE OF
YOUR CHILD'S NEEDS!

