

ADMISSIONS FORM

Please spend some time filling in this form, with, or on behalf of your child, giving as much information as possible, to ensure we start with a good knowledge of what things make them unique. This contribution from you:

- Celebrates your child's learning journey so far
- Values you as your child's prime educator
- Acts as a starting point for Early Years Practitioners in our setting to begin to make a contribution to your child's learning and development

Child's Name: _____ Date of Birth: _____

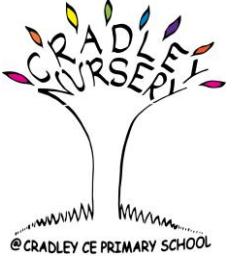
My family members (include all the people who live at home, from oldest to youngest, any special names your child has for them and their relationship to your child. Include pets): _____

Other people/friends who are important to me (include special names they have for these people and who they like to spend time with): _____

My favourite events/celebrations are (birthday, Christmas, religious festivals etc): _____

My favourite things at the moment are (include favourite games/toys/stories/activities in and out of the home like swimming, toddler groups, gym etc): _____

I don't like: _____



At home I speak (include all languages spoken at home and/or any other language your child can speak): _____

My routines (include special toys, books, comforters, home routines that might be used to help settle them into Nursery initially): _____

My Personality (sociable, shy, nervous etc): _____

Language and communication (special words for things, speech and language difficulties, limited vocabulary, rich vocabulary): _____

Physical development (include whether your child is in nappies, potty training, dry, able to go to toilet independently, sleeps during the day etc): _____

Things I am looking forward to at Nursery:

Health issues:

Any other requirements/concerns/information you would like us to know:

I can (please fill in/tick any of the following things your child can do already):

Dress/undress myself

Zip/unzip my own coat

Put on my own shoes

Tell someone when I need the toilet

Go to the toilet by myself

Wash my hands by myself

Feed myself

Count to-

Recognise the following colours:

Recognise the following shapes:

Sing along to nursery rhymes

Write my name

Follow simple instructions

Climb

Walk downstairs independently

Jump off things and land appropriately

Complete a simple computer program

Make-believe by pretending

Show care and concern for living things

Talk about something to a small group of children

I understand that this profile will be the start of my child's learning journey and I am happy for this information to be shared with other people in their care and education.

Signed _____

Date _____