**All About Me**



**Name** –­­­­



This is a picture of me.

My name is …………………………………

I was born in ……………………………….

I live with ……………………………………

Before I started school I went to ………

…………………………………………………..



I have ………….. brothers aged ………….

They are called ……………………………..

I have ………….. sisters aged …………….

They are called ……………………………..



**My favourite things!**

(Please talk to your child about the things on this page)

On my own I like to…..

With my friends I like to …..

My favourite toys and games are …..

My favourite songs and rhymes are …..

My favourite stories are ….



Things I am good at!

I am really good at ……

Recognise some letters

Use Scissors

I can share my toys

Put on my coat by myself

Get dressed by myself

Recognise some numbers

Go to the toilet myself

Use a knife and fork

Read some words

Count \_\_\_ things



I am learning to ….

Write my name

Join in with rhymes and poems

Share and take turns

Ride my bike or scooter

I may get worried or upset by ….



**Personal Details**

First language of child

First language of Parents

Language/s spoken at home

Who will bring your child to school?

Who will collect your child?

Is your child able to go to the toilet alone?

Has your child been involved in any Nursery pre-school groups?

Has your child any health problems or food allergies?

Have there been any problems or concerns in your child’s development?

Has your child been identified as having any special educational need?

Have any other agencies been involved with your child? (i.e. speech and language)

Signature required …………………………………….