

**TRANSITION INFORMATION – STUDENTS**

**(Please support your child to complete the form below)**

|  |
| --- |
| **Name:** |
| **When I start at Wellfield Academy, the things I am looking forward to the most are:** |
| **The thing I’m worried about the most when starting Wellfield Academy is:** |
| **If I could be placed in a House with some friends it would really help. Their full names are: (Include surnames)** |
| **With reasons, my favourite subjects at school are:** |
| **The subjects or other things that I need support with are:** |
| **The hobbies, including any clubs that I enjoy taking part in outside of school are:** |
| **When I meet someone new who is the same age as me for the first time, I would describe myself as:** |
| **What are your dreams?:** |
| **Do you expect you will settle in well to high school?**  **1 – Strongly Disagree 2 – Disagree 3 – Agree 4 – Strongly Agree** |