

All About Me!

Child Information

Child's Full Name: _____

Name your child likes to be called: _____

Date of Birth: _____

Age: _____

Start Date: _____

Previous nursery or childminder your child has attended for a handover

My Family

Parent(s)/Carer(s) names: _____

Who lives at home with me? _____

My favourite people are including pets and special people -----

----- Languages spoken at home:

Religion / Cultural traditions (if any): _____

My Favorites

Favorite toy/stuffed animal: _____

Favorite book or story: _____

Favorite song or rhyme: _____

Favorite food: _____

Foods I don't like: _____

Things That Make Me Happy

Things That Might Upset Me

Comfort & Care

I usually nap at: _____ am/pm

I need a comforter to sleep: Yes / No

How do I like to sleep? ----- My

comforter is: _____

I am toilet trained: Yes / No / In Progress









I need help with: _____

I will be having a packed lunch/ a school dinner/ alternating between the two.

I'd like you to know this about my eating habits

As a parent I would like support with

Things I Like To Do

 Drawing /  Running /  Reading /  Puzzles /  Baking /  Music /  Building /  Outdoor play

Anything Else You'd Like Us to Know?

Is there anything else you would like us to know?

Have you got any concerns?

i.e. Special Educational needs, Speech and Language, sensory needs, communication and language.

Parent/Carer Signature: _____

Date: _____

PLEASE INCLUDE A HEAD AND SHOULDER PICTURE OF YOUR CHILD TO BE USED IN NURSERY.