**Entry Profile: Foundation Class**

**PERSONAL DETAILS**

|  |  |
| --- | --- |
| Child’s full legal name |  |
| Preferred first name |  |
| Date of birth |  |
| Names of Parents/Carers |  |
| Names and ages of brothers/sisters |  |
| Religion |  |

**PRE-SCHOOL/ NURSERY SETTINGS:**

Mrs Riches and Mrs Lawrence will make contact with your child’s pre-school/nursery. This will enable them to start gathering information so we can put things in place to give them the best possible start in September.

**Name of pre-school(s)/ nursery/ childminder attended with dates:**

Please provide the name of your child’s key worker and the contact number of the pre-school/ nursery/ childminder attended. (By doing so you agree that we may contact the person to talk about your child):

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_**

**PHYSICAL/ MEDICAL CONDITIONS:**

* Any physical/ medical conditions: (eg: speech, sight, hearing, allergies, hospitalisation etc)
* Names and contacts of professionals (with their titles) involved with your child (eg: speech and language therapists/ Health Visitors etc)

**PRACTICAL SKILLS WITH WHICH YOUR CHILD MAY NEED HELP:**

Dressing/ undressing:

Use of toilet:

Any others:

**YOUR CHILD’S SPECIAL FRIENDS:**

**THINGS YOUR CHILD LIKES TO DO:** playing outside, drawing, construction etc

**ANY FEARS/ ANXIETIES:**

**WHO WILL COLLECT YOUR CHILD FROM SCHOOL:**

**ANY ADDITIONAL INFORMATION:**

**SIGNATURE OF PARENT/ CARER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_**