

Your Child’s Personal Profile – Transitional Starting points

Dear Parent

Thank you for choosing the Early Years setting:

- To settle your child in smoothly, quickly and as comfortable as possible there are some statutory questions below. Please answer as honestly as possible
- It will help the setting gain better understanding of “All about your child”
- The information given will be confidential and stores safely in your child’s file maintaining GDPR
- It can further be used as a developmental tool, to ensure your child grows and develops to their full potential
- Let’s consider a ‘review’ meeting at the end of the settling in period
- Please ask if support is needed to complete this form
- The setting is more than happy to complete it with you. This could be via a virtual/video call or Face2face

CHILD’S NAME.....CHILD’S AGE IN MONTHS.....

HOME LANGUAGE.....OTHER LANGUAGE.....

DATE CHILD STARTED:.....SETTLING IN PERIOD: 6 WEEKS

Your child’s Health:	For ease there’s opportunities to tick YES/NO but where possible, please give as much supportive information as possible	Setting use only:
Was your child born with a healthy birth weight?	Yes No Why?	
Were there any complications during giving birth?	Yes How? No	
Has your child had their two year old check with Health Visitor	Yes No Why?	
Are there any *Protected Characteristics within your immediate family?	*These are, all of which fits within The Equality Act 2010 Age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.	

Your child's home (inclusive)environment:	For ease there's opportunities to tick YES/NO but where possible, please give as much supportive information as possible	Possible learning opportunity during settling in:
Does the child have indoor space to play and explore?	Yes Which rooms are accessible? No	
Is there green space such as a garden or local park where child can play?	Yes Does your child go outside daily? No	
How will your child arrive to the setting?	Car Foot Bus Other	
Who are the important people in your child's life?		
Does the family have extended family and/or social networks they belong to?	Yes Who? No	
Does the child stay with anyone regularly other than the main parent/carers?	Yes Who? How often? No	
Is your child an only child?	Yes No	
Names and ages of brothers/sisters	Name Age	
Child's preferred name or a nickname to be used?		
Is your child's nature a dominant/placid at home?		
Is your child frightened of anything?	Yes What? No	
Does your child show a secure attachment pattern to the primary caregiver? Any struggles with letting go of primary caregiver? Has COVID-19 affected your child?	Yes No Yes No	

Does your child have any pets?	Yes No	
What rules or boundaries are used at home? Are they consistent	Yes No	
Child's routine:	For ease there's opportunities to tick YES/NO but where possible, please give as much information as possible:	Possible learning opportunity during settling in:
Does your child have a regular pattern for eating?	Breakfast time and favourite food: Lunchtime and favourite food: Dinnertime and favourite food:	
Does your child have a regular pattern for sleeping?	Sleep time Awake time	
Where does your child sleep?	Cot Own Your bed Other	
Does the child have a pattern for playing? For example When Plays consistently with toys By self Needs to be shown	Playtime (likes and interests): Favourite toy/s:	
Does your child play with other children?	Yes No	
Does your child have a bedtime story?	Yes No	
Foods:	For ease there's opportunities to tick YES/NO but where possible, please give as much information as possible:	
What's your child's favourite food?		
What food does your child dislike?		
What does your child drink	Milk Water Other	

Physical Development	For ease there's opportunities to tick YES/NO but where possible, please give as much information as possible:	Possible learning opportunity during settling in:
Use a lidded cup or regular cup?	Yes No What	
Can your child use a spoon, fork and a knife	Spoon Fork Knife Prefers fingers	
Is your child used to consistent hygiene practices? Please give explanation on HOW i.e. Can wash hands but sometimes leaves the soap on or forgets the soap!	Wash hands by self? Toilet by self? Clean their own bottom? Teeth by self? Dress self? Wipe their own nose?	
I enjoy learning how to kick, throw and catch balls	Yes No	
I can stand on one leg and balance	Yes No	
I can use a balance bike/scooter or push along wheeled toy	Yes No What	
Can use stairs aided/unaided	Yes No	
Good hand and eye coordination?	Yes Not yet	
I can run safely on whole foot	Yes Not yet	
I am still in nappies	Yes No	

Personal Social and Emotional Development	For ease there's opportunities to tick YES/NO but where possible, please give as much supportive information as possible:	Possible learning opportunity during settling in:
I am confident to play on my own and with other children	Yes No	
Able to share?	Yes Not yet	
Generally happy?	Yes Not yet	
Will seek adult comfort by self?	Yes Not yet	
Likes to be independent?	Yes Not yet	
I use words/gestures to tell you I need something	Yes No What	

Communication and Language	For ease there's opportunities to tick YES/NO but where possible, please give as much supportive information as possible:	Possible learning opportunity during settling in:
Enjoys singing simple songs and rhymes	Yes No	
Can follow simple instructions	Yes No	
Begins to put words together	Yes No	
Enjoys looking at books alone	Yes No	
Enjoys listening to a story with an adult	Yes No	
Enjoys helping to tell a story	Yes No	
I can feel frustrated when I can't make myself understood	Yes No	

Literacy	For ease there's opportunities to tick YES/NO but where possible, please give as much supportive information as possible:	Possible learning opportunity during settling in:
I have a favourite book	Yes No	
I like to repeat words and phrases from my favourite book	Yes No	
I like to use props to act out familiar stories	Yes No	
I notice the first letter of my name	Yes No	
I notice bus/door numbers and logos	Yes No	
I give meaning to marks that I make	Yes No	
Mathematics	For ease there's opportunities to tick YES/NO but where possible, please give as much supportive information as possible:	Possible learning opportunity during settling in:
I can say lots, more or the same when comparing	Yes No	
I like to count in everyday routines when I play	Yes No	
I can do inset puzzles	Yes No	
I use words such as big, little, high, low etc.	Yes No	
I notice patterns and arrange things in patterns	Yes No	
Understanding the world	For ease there's opportunities to tick YES/NO but where possible, please give as much supportive information as possible:	Possible learning opportunity during settling in:
I enjoy exploring the natural world	Yes No	
I like to explore objects with different textures, sounds, smells and tastes	Yes No	

Expressive Art and Design	For ease there's opportunities to tick YES/NO but where possible, please give as much supportive information as possible:	Possible learning opportunity during settling in:
I enjoy exploring paint, using brushes and other tools	Yes No	
I begin to take part in pretend play	Yes No	
I manipulate different play materials like play-dough	Yes No	
I use my imagination when I think about what I can do with different materials	Yes No	