Starting Points and Additional Information for



Toddlers and Pre-School

This information will be used to help staff members get to know your child and their abilities, to ensure we are supporting your religion or faith and to be able to talk day to day with your child about their home life.

Child's Name:	Preferred name:	DOB:
First Language:	Other languages spoken:	Ethnicity/Religion:
Other settings attended:	Any additional support required:	Festivals celebrated:
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Siblings:	Pets:	Family birthdays:
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Is your child able to use		
cutlery to feed themselves?		
Does your child have any		
specific words they use		
instead of the normal word		
for items?		
Does your child have a		
comforter?		

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Does your child require a	
sleep / rest during the day? If	
so, how would you like us to	
put them to bed?	
The second state of the se	
Is your child potty training or	
can they use the toilet on	
their own?	
Can your child identify any	
colours, numbers, shapes or	
letters?	
Does your child have any	
allergies or cultural food	
requirements?	
Does your child have any	
regular medications or	
medical conditions?	
Is your child able to have	
sudocream applied if staff	
members believe it to be	
necessary?	
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Can staff members apply	
sensitive factor 50 sun cream	
to your child?	
to your crima:	
la vour shild able to dress /	
Is your child able to dress /	
undress themselves?	
Has your child shown a	
preference to which hand	
they use?	
Main people, such as friends	
and family in your child's life.	

Please provide details of your child's language and ability to communicate.		
Please provide details of your child's understanding.		
Does your child attend any other settings or childminder? If so please provide us with the details.		
Your child's daily routine.		
Additional information you feel would be useful to the nursery.		
If any important information changes, please inform the nursery as soon as possible so we are able to amend our records.		
Signature:		
Name:	Date:	