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ALL ABOUT YOUR CHILD

What is your child's name?			
Which person is very special to your child?			
Are there any special occasions or religious festivals your child celebrates?			
Can your child do these things without help?	Put on his/her coat	Yes	No
	Fasten his/her shoes	Yes	No
	Change from shoes to wellingtons unaided	Yes	No
	Go to the toilet unaided	Yes	No
	Wash his/her hands	Yes	No
How does your child feel about starting school? What might worry your child about starting school? What might worry you about your child starting school?			
What does your child like doing at home?			
Does your child have a favourite toy?			
Does your child like playing with other children?			
Does your child like taking turns and sharing when he/she is playing with other children?			
Does your child usually eat their lunch?			
Do they use a knife and fork?			
What pleases you about your child?			

