

All about me!

Name _____ Age _____

Please tick or shade the boxes below to tell us about your child's skills and abilities. Please also tell us anything else that you would like us to know about things that your child enjoys. (Use the back of the sheet) Thank you for sharing this information with us!

I can listen carefully to what others say and can ask them questions
 Yes No
 Sometimes

I can name some simple shapes like triangle and square.
 Yes No
 Sometimes

I like to make up stories in my games and pretend that I am different characters.
 Yes No
 Sometimes

I like looking at lots of different types of books
 Yes No
 Sometimes

I can talk about ways to keep my body healthy like taking exercise and eating different foods.
 Yes No
 Sometimes

I can say some words that rhyme like 'cat' and 'hat'
 Yes No
 Sometimes

I have a favourite hand for writing and am starting to write letters that others recognise!
 Yes No
 Sometimes

I can talk about where I live and the things my family likes to do.
 Yes No
 Sometimes

I understand that there are rules that I need to follow to stay safe.
 Yes No
 Sometimes

I enjoy creative activities like painting and model making.
 Yes No
 Sometimes

I can follow a series of short instructions.
 Yes No
 Sometimes

I will talk to others if I need help or if I have something interesting I want to say.
 Yes No
 Sometimes

I can recognise the numbers from 1 up to 5.
 Yes No
 Sometimes

I am able to concentrate and sit quietly for some activities.
 Yes No
 Sometimes

I can climb with confidence and jump and land safely.
 Yes No
 Sometimes