



Ss PETER AND PAUL CATHOLIC PRIMARY SCHOOL



"To grow in knowledge and love, and walk in the footsteps of Jesus"

# All About Me!

My full name is \_\_\_\_\_

I like to be known as \_\_\_\_\_

Here is a picture/drawing of me!



This booklet is for you and your child to complete together.

We want to get to know your child so that you feel confident that your child will be happy and safe with us.

- Fill in what you can
- Do a bit at a time
- Don't worry if it's a bit messy

Please come and talk to us or contact us via school if you have any questions or concerns. Please bring this to school on your child's first day at school if not before. Thank you.

We hope you enjoy completing this book together.

I am \_\_\_\_\_ years old.



My birthday is on \_\_\_\_\_

These are the people and pets who live in my home:



These friends and family are important to me:



Things I would like to tell you about my family are:

The main language I speak at home is \_\_\_\_\_

I like to eat...



I like to read...



My favourite programme is...



My favourite song/rhyme is...



My favourite toy is...



My favourite game is ...



My other favourite things are...

Things I like to do... draw a 😊 if you like doing these...

Throwing and catching balls



Playing pretend games



Playing on my own



Building with blocks



Playing with other children



Sharing and taking turns



Playing with soft toys/dolls



Playing with cars/trains



Things I like to do... draw a 😊 if you like doing these...

Painting and drawing



Watching TV



Looking at books



Using a tablet, ipad or laptop



Dancing and singing



Playing with puzzles



Playing with sand and water



Other things I like to do or play are...

Parents' / Carers' Page

My child will be brought to school / collected by

**Name** \_\_\_\_\_ **Contact number(s)** \_\_\_\_\_

**Name** \_\_\_\_\_ **Contact number(s)** \_\_\_\_\_

**Name** \_\_\_\_\_ **Contact number(s)** \_\_\_\_\_

My child has allergies, medical conditions, takes regular medication Yes /No (if yes please tell us what they are)

\_\_\_\_\_  
\_\_\_\_\_

Things my child can't eat or drink e.g. non halal meat, kiwi fruit etc. \_\_\_\_\_

\_\_\_\_\_

My child sleeps well usually  sometimes  never

Does your child have any other problems or is there anything else you are worried about? (You can talk to us if you don't want to write it here) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Please give the following information

My child has / has not previously attended nursery / playgroup /  
childminder (delete as appropriate) \_\_\_\_\_

\_\_\_\_\_

My child is shy when \_\_\_\_\_

\_\_\_\_\_

My child finds it difficult to \_\_\_\_\_

\_\_\_\_\_

My child is confident when \_\_\_\_\_

\_\_\_\_\_

My child gets upset / frightened when \_\_\_\_\_

\_\_\_\_\_

Is there anything else you would like to tell us about your  
child/family? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



