

**CONFIDENTIAL**

**Sibford Gower Endowed Primary School**

**Transition Questionnaire**

It is really important that you fill this form in as accurately as you possibly can. This will enable us to build up a picture of your child. Research has shown that early experiences play an important role in the development of children, as does family learning patterns eg Dyslexia, anxiety etc. This information will remain confidential and used to support your child if/when needed.

Child's Name	
Parent's names	
Name your child likes to be known as	
Any siblings? Names & ages	
Family members close to child we should know about.	
Name of Preschool	
Friends already at school or starting school this year.	
Fears- we need to know about	
How does your child cope in new situations?	
Any illnesses or injuries – we need to know about (broken bones – affects movement or ear infections affecting hearing)	
Was your child premature?	
Are their Injections up to date?	
Has your child any food intolerances/allergies? (Also in application paperwork)	
Any Family learning concerns (Dyslexia, speech & language, hearing, movement)	
Any direct Family illness which we need to be aware of in case of late/no show at pick up.	

If your child has glasses and when should they be worn.	
Does your child have hearing difficulties (other than selective hearing!)	
Who will regularly be collecting your child?	
Will they attend Breakfast club (when in place)	
Will they be attending school club (when in place)	
Will they be travelling on the school Bus to/from school?	
<p>Please make a note of anything else you would like to communicate about. There are no such things as 'silly' questions. You know your child the best and the more information you can give us the better we can support you and your child in school.</p>	

Many thanks for taking the time to complete this form.

Your support is really appreciated and we look forward to working with you.

Please return this to school in September.

Best wishes

Ms Blake