



## Capturing Kids' Minds

# ALL ABOUT ME

CHILD'S NAME					
DATE OF BIRTH					
NICKNAME					
PRE-SCHOOL START DATE					
DAYS OF ATTENDANCE	MON	TUES	WED	THUR	FRI
LIKES					
DISLIKES					

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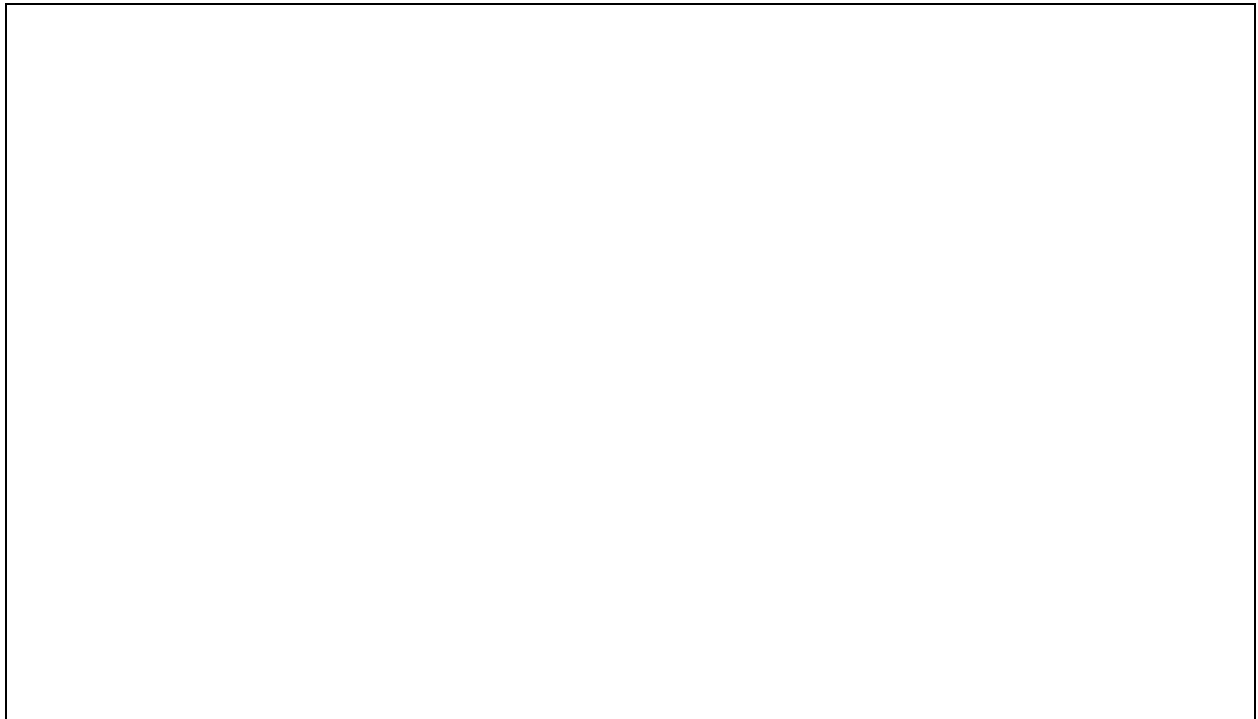
MY FAVOURITE SONG IS	
MY FAVOURITE BOOK IS	
MY FAVOURITE TOY IS	
GOALS	

### FAMILY INFORMATION

I LIVE WITH			
AT HOME THE LANGUAGE WE SPEAK IS			
OUR CULTURAL BACKGROUND IS			
WE CELEBRATE			
OUR CULTURAL TRADITIONS INCLUDE			

## EATING HABITS

I HAVE A FOOD ALLERGY/INTOLERANCE DIETARY REQUIREMENT		<input type="checkbox"/> YES <input type="checkbox"/> NO
PLEASE EXPLAIN THE ALLERGY		
FAVOURITE FOOD		
FOOD I DON'T LIKE		



Draw a picture of you and your family