

**WHAT IS YOUR CHILD LIKE NOW, AND WHAT ARE THERE
LIKES AND DISLIKE?**

Does your child like walking, running, climbing, riding a bike, football or other games (please underline).

Does your child like drawing pictures, writing, doing jigsaws, construction kits, stories.

Can he/she dress themselves, do buttons up, zips, shoes on, shoes off, laces up.

How is your child's speech? Needs help and encouragement. Can make him/her self understand. Good.

Does he/she like watching TV. reading, drawing. Is he /she able to share yes/no

Will he/she be happy to leave you when starting pre-school yes/no

Any brothers or sisters, if so older or younger.

Behaviour at home; shares - co-operates - listens - carries out requests - temper tantrums - affectionate - abides by rules.

What does your child enjoy doing most.

Any additional information we need to be aware of.

PLEASE NOTE THAT THIS INFORMATION MAY CHANGE FROM THE TIME THAT YOU COMPLETE THIS FORM TO THE TIME YOUR CHILD STARTS AT HAYLANDS. PLEASE COMPLETE TO THE BEST OF YOUR CHILD'S ABILITIES.