|  |  |
| --- | --- |
| Child’s Name:  | DOB: |
| Name of Setting: |
| Completed by:  |
| Attendance pattern:  |
| Parent/Carer comment:Parent/Carer Signature: |
| Key person’s comments: |
| Other professionals worked with: | Speech and Language Therapist | Educational Psychologist | Paediatrician | Social Worker | Occupational Therapist/Physiotherapist | Other |
| CLA/PLA: Y/N | Accessed EYPP funding Y/N |
| Date of latest WellComm screening: | WellComm section child achieved green:  |
| SEND register Y/N | Any referrals made? (if yes, provide dates) Y/N |
| Additional interventions / support provided: |
| How to support me in my new setting to ensure a smooth transition - needs and interests:  |

*The information in this document is produced from conversations with parents/carers, evidence from the child’s learning journey and also observations from practitioners within the setting. I give permission for this information to be passed to my child's next setting.*

Early Years Foundation Stage

Pre-school Transition Document



**Summative assessment judgements – Development Matters**

|  |  |  |  |
| --- | --- | --- | --- |
| Indicate the age phase that best fits the child`s stage of development. | Date Completed | **Birth - 3 years old** | **3 - 4 years old** |
| **Personal, Social****and Emotional Development** |  |  |  |
| Physical Development |  |  |  |
| Communication and Language |  |  |  |
| **Literacy**  |  |  |  |
| **Mathematics** |  |  |  |
| **Understanding the World**  |  |  |  |
| **Expressive Arts and Design** |  |  |  |
| Comment on how the child learns - the Characteristics of Effective Learning, schemas etc:  |