ALL ABOUT ME

Please complete this form to help educators in getting to know your child. This information helps with the orientation process, settling your child into care and helps our educators meet your child's individual needs.

First name | Last name

Preferred name | Date of birth

Language/s

Additional personal information*

*optional

FAMILY

Special people:

Parents/ Carers

Siblings

Other people

Activities we do as a family:

Any cultural practices or beliefs you would like to share:

Please tick all boxes that apply when completing the following sections.

TOILETING

Current toileting:

☐ Nappies ☐ Toilet training ☐ Needs reminding ☐ Manages on own

Extra toileting information:

ALL ABOUT ME

INFANT FEEDING

Current infant nutrition:

☐ Breastmilk ☐ Formula ☐ Both ☐ Cows milk (≥12 months)

Our services supports breastfeeding for as long as the parent and infant are happy to do so.

Currently fed using:

☐ Breast ☐ Bottle ☐ Both ☐ Cup

Approximate feeding times:

If expressed breastmilk or formula run out, please follow the instructions below:

Feeding whilst in care:

☐ Attend the centre to feed ☐ Provide infant formula

☐ Supply expressed breastmilk ☐ Other:

If you would like to attend the service to feed, how can we support you?

Baby's typical hunger signs:

☐ Side to side head movements ☐ Stretching

☐ Hands to mouth ☐ Mouth movements

☐ Crying ☐ Turning head/seeking/rooting

☐ Other:

ALL ABOUT ME

EATING

Current foods:*

- ☐ Infant cereal
- ☐ Pureed
- ☐ Minced
- ☐ Chopped
- ☐ Finger foods
- ☐ Family foods
- ☐ Other:

*Recommend to commence food from about 6 months of age

Feeding development:

- ☐ Feed myself
- ☐ Have help
- ☐ Both
- ☐ Other:

Utensil use:

- ☐ None
- ☐ Spoon
- ☐ Fork
- ☐ Other:

Allergies:

Intolerances:

Please speak to our educators about further documentation we require for any allergies & intolerances.

Favourite foods:

Cultural nutrition requirements: (e.g. halal)

Additional information:

ALL ABOUT ME

SLEEPING AND SETTLING

Comfort:

- [ ] Wrapped
- [ ] Sleeping bag
- [ ] With comforter
- [ ] Other:

Settling:

- [ ] Self-settle
- [ ] Gently rocked
- [ ] Softly patted
- [ ] Rubbed
- [ ] Other:

Sleeping times:

Tired signs:

- [ ] Yawning
- [ ] Quieting down
- [ ] Cuddly/seeking comfort
- [ ] Jerky arm and leg movements
- [ ] Grizzling/crying
- [ ] Other:

Extra information about my sleeping:

PLAYING

Developmental milestones:

- [ ] Lay on tummy
- [ ] Roll over
- [ ] Sit supported
- [ ] Sit unsupported
- [ ] Crawl
- [ ] Pull up to stand
- [ ] Walk
- [ ] Climb

Activities:

- [ ] Books
- [ ] Music
- [ ] Blocks
- [ ] Puzzles
- [ ] Drawing
- [ ] Painting
- [ ] Water play
- [ ] Outside activities
- [ ] Other:

Dislikes: