

turn over if you require extra space to write)

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We would like to get to know you for 2020!

This form helps us plan for your child's start to Rangeview and gives us information to help create a smooth transition to primary school. Due consideration will be given to the information provided. Please return this form by the end of term 3, 2019.

- Carol Wilson, Sam Clarke, Jennifer Bonte, Margaret Goulding and Vicki Tzimos (Transition Co-ordinators)

iviy Cilliu 5 Haille. (as or	n birth certificate):	
My child's preferred name: Pre-School History: (Please name the centre your child currently attends and give an indication of the days or time spent there)		
1		<u>-</u>
2		
3		
4		-
5		<u>-</u>
Medical / Behavioural / Social Please list any medical, behavioural or soc speech, developmental, medical and refer	cial issues that are rele	evant to the education of your child. These can include f you require extra space to write)
Other insights:		
Do you speak another language other.	her than English at hor	ne? Language, if other
If so, when does your child speak E	English?	
Will your child be using Before and	After School Care?	YES / NO
Does your child have trouble separ	ating from you?	YES / NO
Can your child recognise his/her na	ame in print?	YES / NO
• Can your child write his/her name?		YES / NO
Which is your child's preferred hand	d? L	EFT / RIGHT
 Please write down any information 	you think we need to k	now when planning for your child's education (please