



Kent Nursery
DUBAI

All About Me

My Name is: _____ **Nickname (if any)** _____

Date of birth: _____

My sibling(s): _____

Father's Name: _____ **Mother's Name:** _____

My favourites:

My favourite nursery rhyme:

My favourite food:

My favourite story:

My favourite toys:

My favourite people:

Words that soothe me:

Sounds that I love:

Any particular dislikes:

My Routines:

How do I go to sleep? What are my routines?

Any other information you would like to share with us.

What are my eating and drinking routines?

Can I use cutlery on my own? Yes No Can I open my water bottle on my own? Yes No

Do I use a bottle?	Yes	No	Other
Do I use a dummy/pacifier?	Yes	No	Other
Do I use a comforter?	Yes	No	Other

- Potty trained
- Potty on progress
- Using diapers

Note:

Anything else you'd like to share?

Parent's Signature: _____

Date: _____