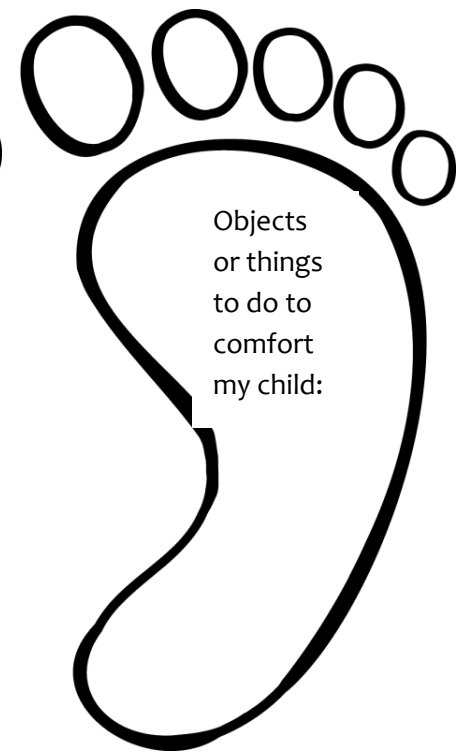


## Getting to know you

Name:

Please fill this in and bring it to school when your child starts Nursery

How does your child separate from you?	How does your child make their needs known?	At what stage of toilet training is your child?



Anything else you would like the Nursery team to know: