



St. Bonaventure's Catholic Primary School

ESSENTIAL PUPIL INFORMATION FORM

Dear Parent or Carer,

We would be grateful if you would provide us with answers to the questions below. This information will help us to look after your child in the best way possible.

Many thanks, *Reception team*

CHILD'S NAME:	
DATE OF BIRTH:	
PRE-SCHOOL/NURSERY (If we are able, we try to visit your child in their education setting, however, this may not be possible in all cases)	
Has your child attended a pre-school or nursery?	Yes/No
Name of pre-school/nursery:	
Contact details of pre-school/nursery (telephone, email, and address):	
LANGUAGES SPOKEN	
Is English your child's first language?	Yes / No
If not, please state which languages your child speaks:	
MEDICAL NEEDS	
Please provide brief details of any medical needs:	
Does your child have any specific dietary requirements (e.g. diagnosed food allergy/vegetarian etc).	
SPECIAL EDUCATIONAL NEEDS	
Does your child have a diagnosed special educational need?	Yes / No
If yes, please provide us with brief details or provide us with details of any investigations your child is having to reach a diagnosis:	
ANY OTHER INFORMATION	
If you have any concerns about your child's development, or if you would like to tell us about anything you think we need to know to help them, please let us know here. We are currently working towards being a Prem Aware School and if you would like to share information if your child was born prematurely please include it here.	