

THE EARLY YEARS AT SEYMOUR INDIVIDUAL NEEDS QUESTIONNAIRE



Seymour College has an open enrolment policy. In accordance with this policy and to ensure that all students have access to the most appropriate education and support for their individual needs, we ask that you complete this Individual Needs Questionnaire. This is to ensure that we are fully informed of your child's individual requirements and can provide the necessary support.

Student's Name: _____ DOB: _____

Proposed year/term of entry: _____ Proposed level of entry: _____

Name of current Child Care Centre/Early Learning Centre and year level:

Languages Spoken

1st _____ 2nd _____ 3rd _____

Language usually spoken in the home: _____

Medical/Health/Allergy Issues

Does your daughter/son have a medical or physical condition which could affect her/his learning and/or involvement in activities?

Please include details of any relevant allergies.

YES NO

If yes, please describe below and attach copies of any relevant professional reports and documentation.

Hearing And Vision

Does your daughter/son have any sight or hearing/ear problems which could affect her/his learning?

YES NO

If yes, please describe below and attach copies of any relevant professional reports and documentation.

Emotional/Social Issues

Does your daughter/son have any specific emotional or social needs?

Are there any special considerations for your child, such as cultural, religious or dietary requirements or additional needs?

YES NO

If yes, please describe below and attach copies of any relevant professional reports and documentation.

Birth/Reaching Milestone

Did your daughter/son have a normal delivery? Are you reaching developmental milestones?

YES NO

If yes, please describe below and attach copies of any relevant professional reports and documentation.

Learning Difficulties

Does your daughter/son have a diagnosed learning difficulty?

YES NO

If yes, please describe below and attach copies of any relevant professional reports and documentation.

Support

Is your daughter/son receiving (or has previously received) support from others (e.g. educational or other psychologist, counsellor, physiotherapist, occupational therapist, speech pathologist, access assistants, behavioural optometrist, audiologist)?

YES NO

If yes, please describe below and attach copies of any relevant professional reports and documentation.

Additional Information

Is your daughter/son fully toilet trained?

YES NO

If your child has a medical condition which makes this requirement difficult or impossible, please describe the condition below and attach copies of any relevant professional reports and documentation.

Other

Is there any other information about your daughter/son which would be beneficial for the Early Years prior to enrolment?

If you have identified any specific individual needs, we will arrange an appointment to discuss further with you how The Early Years at Seymour might best support your daughter/son's learning and care.

Enrolment for a child who has been identified with special needs cannot be confirmed until full consideration has been given to the special needs of the child and whether The Early Years at Seymour can appropriately meet those needs.

It is essential to complete all sections of the above questionnaire accurately. Failure to do so may result in The Early Years at Seymour being unable to accommodate your child's individual needs and may affect her/his continued enrolment should we become aware of these needs after your child has commenced her/his education at The Early Years at Seymour. Should your child's circumstances change before the time she/he commences at The Early Years at Seymour, the information on this form must be updated.

Signature of Parent/Guardian: _____

Date: _____