

# Transition to Reception

## ◆ I Can... Checklist ◆

Child's Name: .....

Tick what I can do!

### ■ Toileting

- ☐ Use the toilet independently
- ☐ Wipe myself and flush
- ☐ Know when I need to go
- ☐ Wash & dry my hands after

### ■ Mealtimes

- ☐ Use cutlery to feed myself
- ☐ Eat a range of foods
- ☐ Open my own packaging
- ☐ Try unfamiliar foods
- ☐ Pour water into a cup
- ☐ Serve myself at mealtimes

### ■ Self-Care

- ☐ Wash hands with soap (20 secs)
- ☐ Wipe my own nose
- ☐ Sneeze into my elbow or tissue
- ☐ Ask for help when I feel unwell

### ■ Getting Dressed

- ☐ Take off my coat & hang it up
- ☐ Find & put my coat on
- ☐ Put my own shoes on
- ☐ Manage my own underwear

### ■ Personal, Social & Emotional

- ☐ Separate from parent/carer
- ☐ Share and take turns
- ☐ Seek adult help when needed
- ☐ Help carry out tasks for others
- ☐ Follow instructions and rules
- ☐ Understand how others may feel
- ☐ Manage my own emotions

### ■ Communication & Language

- ☐ Listen carefully for a short time
- ☐ Share my thoughts & opinions
- ☐ Hold a back-and-forth chat
- ☐ Ask questions when I'm unsure
- ☐ Recognise my written name
- ☐ Let adults know what I need

### ■ Physical Development

- ☐ Hold a pencil comfortably
- ☐ Draw with care & accuracy
- ☐ Move around spaces safely
- ☐ Turn pages in a book
- ☐ Use scissors

# Transition to Reception

## Child Information for Receiving School

■ Full Name

.....

■ Date of Birth

.....

■ Current Setting (Nursery/Childminder)

.....

■ Receiving Primary School

.....

■ Setting Email

.....

■ Key Person at Setting

.....

■ Gender

.....

■ Terms at Current Setting

.....

■ No. of Settings Attended

.....

■ Fixed Term Exclusions

.....

■ Attendance

Sessions per week

.....

Good attendance (94%+)?

☐

Yes

☐

No

Actual %:

.....

■ Language(s) Spoken at Home:

.....

If EAL, please indicate English level:

☐

No English

☐

Some key vocabulary

☐

Conversational

SEN Support Level — please circle:

No SEN

SEN Support

EHCP in Place

Stat Assessment in Progress

■ Key Concerns / Reason for Referral

.....

■ Medical Diagnosis / Allergies (including medication)

.....

■ Dietary Requirements (e.g. halal, vegetarian, lactose-free)

.....

■ Services working with the child in the last 2 years

.....

■ Family Context — anything the school should be aware of (e.g. new baby, bereavement, family change)

.....

■ Home/School Communication (key contact & best method)

.....

Does this child access their full funded entitlement?

☐

Yes

☐

No

☐

Part-time (please specify in additional notes)

# Transition to Reception

## Additional Information for Schools



Please tick any factors which apply to this child



- ☐ Working below 3-year milestones
- ☐ English as an additional language (EAL)
- ☐ Summer born child in cohort
- ☐ Early Years Pupil Premium (EYPP)
- ☐ Self-help difficulties needing high support
- ☐ Concerns around attendance
- ☐ Limited or no previous early years experience
- ☐ Behaviour Support Plan in place

- ☐ Looked After Child (LAC) or Kinship Care
- ☐ Previously Looked After / Adopted (PLAC)
- ☐ Social care or safeguarding concerns
- ☐ Has accessed Universal Therapies support
- ☐ Statutory needs assessment in process
- ☐ Education, Health & Care Plan (EHCP) in place
- ☐ Disrupted or inconsistent early education
- ☐ Child has an identified key worker / social worker

If Behaviour Support Plan is in place, please give details and attach any plans or risk assessments:



What is working well for this child? (tick all that apply)



- ☐ Use of transitional objects
- ☐ Individual Education Plan (IEP)
- ☐ Makaton signing
- ☐ Smaller group activities
- ☐ Joint attention activities
- ☐ Visuals / musical routine

- ☐ Reduced language approach
- ☐ Clear structure and routine
- ☐ Sensory / movement breaks
- ☐ Peer grouping with known friends
- ☐ Other (see notes on page 4)

Tell us a little more about this child...

What makes them happy and motivated?

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What are they proud of?

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What do they find tricky?

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What strategies already work well at home?

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Child's concerns about starting school?

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Parent / carer concerns about the transition?

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# Transition to Reception

## Notes & Sign-Off

Additional Notes — use this space for anything that matters!



(Continue on a separate sheet if needed)

## What happens next?

- The receiving school will be in touch to arrange a welcome meeting with you and the family.
- Where possible, the school will carry out a home visit before the child starts (DfE April 2026).
- The child will be invited to visit the school before September to meet their teacher and classroom.
- Any support plans, adjustments or referrals will be put in place before the first day.

## Important — Sharing this Information

This form should be completed by the child's current setting or childminder and shared with the receiving primary school before the child starts. Please ensure you have obtained consent from the parent or carer before passing on any information about this child.

## Completed by

■ Name of Practitioner

■ Job Role / Position

■ Date

Signature: .....

Parent / Carer consent obtained?



Yes



No

**Thank you for taking the time to complete this form.**

Developed in line with: Getting children ready for reception (DfE, April 2026)

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