**Early Years SEND Transition Passport**

**The information in this passport will help my next teacher to make me feel settled, secure and ready to learn and develop in my new setting.**

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| **My name:****I like to be known as:****Date of birth:****Age:** | **Photo of me** |
| **What people like and appreciate about me:****Summary of my special educational needs (SEN)** |
| **People involved with me** **(name/role)** | **Their relationship to me**  | **They attended my transition meeting? (Y/N)** |
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| **Important information that you may need to know about me** |
| **How I may communicate with you** |
| **How can you help me communicate?** |
| **My Interests and the things I enjoy doing** |
| **When I am happy, you may see me doing:** |
| **Things that I do not like/make me sad:** |
| **When I am sad you may see me doing**  |
| **These things can make me anxious, and I react to them:** |
| **Strategies that you can use to help me** |
| **What is important to keep me safe and well** |
| **How I move around my environment**  |
| **Equipment that I may need**  |
| **My self-help skills (What I can do by myself and what I need help with)**  |
| **How can you help me to become more independent?** |
| **Other things you may need to be aware of throughout my day** **(dietary, medical, health, allergies)**  |
| **What needs to be put into place to support my additional needs at my new setting?** |