**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?** |