

Manly Vale OSHC Child Profile

Place child's photo here

Full Name:

Nickname:
(if any)

Date of birth: Age next birthday:

Do you have any brothers or sisters?

Yes

No

If Yes, what are their names:

.....

How old are they:

.....

What languages are spoken at home?

.....

Are there any religious or cultural events that are important to your family?

Yes

No

If yes, please provide details

.....

.....

What is your favourite:

Foods:

Indoor Activity:

Colours:

Outdoor Activity:

TV Shows:

Games/Toys:

Music:

Sport:

What don't you like:

Foods:

TV Shows:

What are you scared of?

.....

Is there anything else that you don't like or that upsets you?

.....

.....

What do you like to do when:

You are with your family:

.....

You are with your friends:

.....

You are by yourself:

.....

The information on this form will enable staff to get to know your child and plan a program to meet their individual needs.

Date completed:/...../.....

