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# Assessment and Rating Results Family Letter

INSERT LOGO and address

Dear Families

In an earlier communication I advised we would be assessed by Government officials from the Department of Education.

We have now received our assessment and rating results, and I’m pleased to share these with you as follows:

|  |  |
| --- | --- |
| **National Quality Standard (NQS)** | **Rating** |
| Quality Area 1 Educational program and practice |  |
| Quality Area 2 Children’s health and safety |  |
| Quality Area 3 Physical environment |  |
| Quality Area 4 Staffing arrangements |  |
| Quality Area 5 Relationships with children |  |
| Quality Area 6 Collaborative partnerships with families and communities |  |
| Quality Area 7 Governance and leadership |  |

We’re delighted our results reflect the dedication of all our employees to implementing quality education and care practices.

Our results are displayed near our front entrance.

Please let me know if you have any questions about our Assessment and Rating results.

<insert name of Nominated Supervisor>

Nominated Supervisor

Ph <insert number>

<insert date>

# Assessment and Rating Visit Confirmed Families Letter

INSERT LOGO and address

Dear Families

In an earlier communication I advised we would be assessed by Government officials from the Department of Education.

I now wish to confirm this visit will take place on <insert day date and year> our service will be assessed and rated against the National Quality Standards and Regulations.

The officials are there to observe our normal practices, and there will be no disruption to your child’s learning or care. We look forward to showing the assessors the quality of our curriculum and education and care practices, and will publish our assessment rating once received.

Please let me know if you have any questions about the Assessment and Rating process.

<insert name of Nominated Supervisor>

Nominated Supervisor

Ph <insert number>

<insert date>

# Assessment and Rating Visit Coming Families Letter

INSERT LOGO and address

Dear Families

In the coming weeks we will have one or two visitors to the Centre from the Department of Education whose job it is to assess and rate the quality of our service practices against the National Quality Standard (NQS) and the National Law and Regulations for early childhood services. All services are rated on average once every three years.

Ratings include Working Towards, Meeting and Exceeding the NQS in seven quality areas:

1. Educational program and practice
2. Children’s health and safety
3. Physical environment
4. Staffing Arrangements
5. Relationships with Children
6. Collaborative Partnerships with Families and communities
7. Governance and leadership

Prior to the assessment visit we send our Quality Improvement Plan into the Department for review. This Plan is a record of our strengths, and the actions we have taken to continually improve our service practices. The Plan includes input from educators, families and children. We thank those families who have contributed to the Plan and encourage all families to suggest improvements or identify strengths.

Our visitors will be at the centre for one to two days while completing their assessment. I will advise you of the exact date of the visit once this is known. I wish to assure you there will be no disruption to your child’s education and care during this time. We will also ensure our visitors are never left alone with any of the children.

After the Department visits the centre they will provide a draft report for our comment and feedback three to five weeks after the assessment visit.

We look forward to sharing the results of our assessment and rating with you. If you have any questions about our assessment and rating process please don’t hesitate to discuss them with me.

Kind regards

<insert name of Nominated Supervisor>

Nominated Supervisor

Ph <insert number>

<insert date>

# Casual Educators Letter

INSERT LOGO and address

Dear families,

I’d like to let you know about the processes we have in place to ensure your child’s safety and wellbeing when our permanent staff are ill or absent for other reasons.

We aim to employ educators from a regular pool of casual staff so they become familiar with our practices, routines and expectations, and can develop professional relationships with our children and families. New casual educators will be encouraged to display a photo of themselves together with a short introduction to assist this process. We also give preference to quality staff who come from the same cultural and linguistic backgrounds as our children, families or local community.

Where possible, relief educators are employed on the same day of the week to help them develop a closer understanding of the children attending that day, and to help children become familiar with the casual educator.

Our relief staff complete an induction process to ensure they understand our policies and procedures, as well as their roles and responsibilities while at the service. Like our permanent staff, they must also have clear working with children checks. If time permits, we invite relief staff to visit the service and familiarise themselves with the setting before starting any casual work.

Please feel free to contact me if you have any questions or wish to discuss our staffing arrangements further.

Sincerely,

<insert name of Nominated Supervisor>

Nominated Supervisor

Ph <insert number>

<insert date>

# Child Leaving Letter

INSERT LOGO and address

Dear Families,

There are many reasons why your child may no longer be able to attend our service. We’re always sorry to see our children and families leave, even though we understand that many may be starting the next exciting chapter of their lives at ‘big school!’

If you are planning for any reason to end your enrolment at <insert service name > we require <insert time period eg two week’s notice> as outlined in our Fees Policy. Unfortunately we will be unable to refund your bond if we do not receive this notice. You may advise us below if you’re planning to leave.

We thank you for your understanding.

Kind regards,

<insert name of Nominated Supervisor>

Nominated Supervisor

<insert date>

\_

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_would like to advise that my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

will not require care at <insert service name > after \_\_\_/\_\_\_/\_\_\_. This will be their last day.

**Reason:**

 Moving town Not happy with care provided

 Care at another Centre No longer requiring care

 Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please credit any bond owing towards the bond for <insert child’s name> at centre

 or

 Please credit any bond owing into the following account:

|  |  |
| --- | --- |
| Account name: |  |
| BSB Number: |  |
| Account Number: |  |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Name (please print) Date:

# Child Protection Letter

INSERT LOGO and address

Name

Address Line 1

Address line 2

Dear <insert name>,

At <insert service name> we want all children to have safe and happy lives. Abuse can occur on many levels including sexual, physical, emotional and psychological. It is our moral responsibility as adults to report any suspected cases of abuse to the appropriate authorities. It is also our legal responsibility as educators under state legislation to report specific types of abuse. Our Service’s Child Protection Policy outlines what practices and procedures we implement to protect children from suffering abuse. These include:

* conducting a Working with Children check on every staff member before they are hired.
* reporting any allegation made against a staff member to the appropriate authorities and taking appropriate action following an investigation.
* reporting suspected abuse to the relevant authorities.
* linking families with relevant support services.

We also work closely with other agencies when dealing with child abuse. These agencies also have responsibilities which include:

* receiving, assessing and investigating reports of children who are or may be at risk of harm.
* providing and arranging care or support services for children and their families.
* liaising with other relevant agencies, including the Police Service, to plan, conduct and manage an investigation.
* informing other agencies of the progress and outcomes of assessments and investigations.

If you would like further information on our Child Protection Policy or would like to view our Children Protection Policy please do not hesitate to contact staff. Similarly, if you have any enquiries or concerns about our Child Protection Policy please speak to staff or confidentially to the Nominated Supervisor.

Sincerely,

<insert name of Nominated Supervisor>

Nominated Supervisor

Ph <insert number>

<insert date>

# Clothing – Children Letter

INSERT LOGO and address

Name

Address Line 1

Address line 2

Dear <insert name>,

This is a friendly reminder about the clothing your child wears to the service. Children’s clothing must be comfortable and allow them to participate in a variety of activities. Here are some guidelines:

* clothes that aren’t too tight or too loose and allow children to move around freely and easily. Girls may find skirts and dresses hinder their participation in physical activities, and that shorts or pants allow them to move around freely without being self-conscious
* clothes that allow children to be independent ie they can take them on/off or do them up/undo them themselves eg
* shorts/pants with elasticised waists
* slip-on shoes o shoes with Velcro
* jackets/cardigans with big buttons
* tops/jumpers with big necks
* clothes that are appropriate for the weather ie keep children warm/cool and comply with our sun protection policy
* footwear that allows children to participate in a variety of physical activities. Please note thongs, clogs or backless shoeshave a trip factor and do not allow children to use equipment safely

Please do not send your child to the Service in their ‘good’ clothes. Children often know which clothes are their ‘good’ clothes and may be reluctant to participate in activities where theses could get dirty. We are unable to guarantee that children’s clothes will stay clean at the Service.

We are mindful of different families’ cultural practices and financial situation. If you would like to discuss our clothing policy please do not hesitate to contact educators or talk confidentially talk with the Nominated Supervisor.

Sincerely,

<insert name of Nominated Supervisor>

Nominated Supervisor

Ph <insert number>

<insert date>

# Complaints Letter

INSERT LOGO and address

Dear families,

Our Service welcomes feedback from families because this helps us improve learning outcomes for your child.

You know your child best, so we want you to tell us what is working, what isn’t and what you think could be improved. Please discuss these with your child’s Room Leader, educator or the Nominated Supervisor. We’ll respond personally to these suggestions or concerns unless you’ve provided written feedback and chosen to remain anonymous.

We also encourage you to raise any unresolved concerns or complaints with the Nominated Supervisor using our complaint form. We’ll investigate these as quickly as possible in a thorough and transparent manner following our complaint procedure, and provide you with a written outcome. You’re welcome to view the procedure at any time. If we identify a problem affecting other families, we’ll also let them know about the issue and how we’ve addressed it without revealing your name.

If you have any enquiries about providing feedback or our complaint procedure, please don’t hesitate to contact me.

Sincerely,

<insert name of Nominated Supervisor>

Nominated Supervisor

Ph <insert number>

<insert date>

# Complaint Acknowledgement Letter

INSERT LOGO and address

Name

Address Line 1

Address line 2

Dear <insert name>,

Thank you for your advice of <insert date> describing the problems you have been having with our Service. I understand you are concerned about <insert outline of complaint>. I appreciate your sincerity. Please accept my apologies.

We are not taking your dissatisfaction lightly. I will be using our Complaint Procedure to investigate your complaint as quickly as possible in an impartial, fair and thorough way using the steps below:

1. Investigate the complaint
2. Provide a written outcome of the investigation
3. Document the result and process
4. Offer external review
5. Implement any improvements to service practices and procedures
6. Obtain feedback about the complaint process by questionnaire
7. Track any similar complaints to rectify issues within our Service.

I will be doing my utmost to maintain confidentiality throughout this process. However in order to deal with the complaint effectively, it may be necessary to notify people directly involved. Please be assured, however, that victimisation of any person raising a complaint is unacceptable and may be viewed as misconduct.

I will be in touch shortly after completing an investigation. Please feel free to contact me if you wish to discuss the matter further.

Sincerely,

<insert name of Nominated Supervisor>

Nominated Supervisor

Ph <insert number>

<insert date>

# Concerns About Child Letter

Are you in a situation where you know there is an issue with a child, but the parent is not ready to discuss this issue or do something about it? Again, the EYLF or MTOP Learning Outcomes can help. Identify the outcomes the child is not meeting. Keep them ready because one day the parent will decide to do something and you’ll be able to give them a great list of these concerns based on the EYLF Learning Outcomes which they can give to the specialist professional. If you keep good notes they will be good enough for a paediatrician or other professional to make a diagnosis.

**You may adapt the letter** template on the following page when writing to parents. This can be edited to suit individual circumstances.

INSERT LOGO and address

Dear Sophie

As we discussed earlier Ava is beginning to feel a sense of belonging with her educators.

However, over the past term we have become concerned with Ava’s progress towards the Early Years Learning Framework (or My Time Our Place) Learning Outcomes. We have detailed observations. For example Ava is not:

* reading other children’s social cues or behaviour and often responds inappropriately
* (Outcome 2.1)
* listening to other children’s ideas (Outcome 2.2)
* using what she knows in new or different settings (Outcome 4.3)
* learning to regulate her behaviour eg she has frequent meltdowns (Outcome 3.1)
* using all her senses to explore and investigate eg she is extremely sensitive to loud noise and

physical contact (Outcome 3.2)

OR

*Following on from our meetings/ conversations we would like to have your support with setting up a clear inclusion/ support plan for Ava.*

*Ava’s rights and best interests are paramount to us as we know it is for you. We’re committed to supporting an environment that promotes Ava’s healthy development, learning and wellbeing.*

*In order for us to do this, professional and meaningful partnerships between the service, support professionals and families are essential.*

Over the past term we have become concerned with Ava’s progress towards the Early Years Learning Framework (or My Time Our Place) Learning Outcomes. We have detailed observations. For example Ava is not:

* reading other children’s social cues or behaviour and often responds inappropriately
* (Outcome 2.1)
* listening to other children’s ideas (Outcome 2.2)
* using what she knows in new or different settings (Outcome 4.3)
* learning to regulate her behaviour eg she has frequent meltdowns (Outcome 3.1)
* using all her senses to explore and investigate eg she is extremely sensitive to loud noise and

physical contact (Outcome 3.2)

Please feel free to contact me or Mel the Nominated Supervisor at any time to discuss Ava further, including the potential support we can provide. I have also attached the names and contact details of four services in our area.

Regards

<insert name of Educator/Nominated Supervisor>

Educator/Nominated Supervisor

Ph <insert number>

<insert date>

# Contact Information Update Letter

INSERT LOGO and address

Dear families

We periodically ensure we have current contact information for families to ensure we can contact parents in the event of an emergency.

If your contact details have changed since your child was enrolled or you last advised us, please complete the table below and return to the Service.

Child’s name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
|  | **Contact Information****Parent One** | **Contact Information****Parent Two**Where answer is same as Parent One write same |
| Surname |  |  |
| Given names |  |  |
| Home address |  |  |
| Home phone |  |  |
| Work phone |  |  |
| Mobile |  |  |
| Best contact number |  |  |
| Email |  |  |

Thank you

Insert Name

Nominated Supervisor

Insert Phone number

Insert Date

# Curriculum Topic Art Letter

INSERT LOGO and address

Dear Families,

Currently we’re learning about art in its various forms. Art allows an individual to be expressive and enjoy aesthetics and is usually enjoyed by everyone in some form at all stages of life. Art is particularly popular with young children as they love to explore and discover new things. During our art activities, children will be exploring different types of art, different items that can be used to make art and where art is found. We will be displaying the children’s artwork at the Service and you are welcome to view it at any time.

Some of the experiences we have planned for the week include:

* Creating chalk murals on the paved outside area
* Setting up an art gallery in the play area
* Sorting art-tools
* Creating traditional Aboriginal artworks.

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. Here are some suggestions on how to incorporate art activities into your home:

* Collect art tools and explore them with your child
* Cut various shapes into vegetables like potatoes, put paint on them and let your child create art-work on paper
* Finger-painting
* Collecting interesting shaped leaves, flowers etc, then putting them under a piece of paper and getting your child to rub a pencil over the top.

Through these activities your child will discover interesting and creative ways to use materials. Art also provides opportunities to experiment with colour.

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Birds Letter

INSERT LOGO and address

Dear Families,

Currently we’re learning about birds. This includes keeping birds kept as pets and birds in the wild. Some activities we have planned at the service to promote this learning include:

* Observing different types of bird’s nests with a magnifying glass at the science table
* Discovering unique body parts of birds and bird habitats
* Creating collages out of birdseed
* Making bird feeders
* Building birdhouses

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. Here are some suggestions on how to incorporate bird-related activities into your home:

* Listen to the sound of bird calls when outside or walking
* Set up a bird bath
* Encourage native birds with a bird feeder or by planting bird attracting vegetation
* Set up a timer for a few minutes along with a jar and some buttons or counters, then count as many birds as you can for the set time and drop a button/counter into the jar for each bird. When the time is up, count how many buttons or counters are in the jar. (Good activity for car trips.)

Through these activities your child will learn more about the natural environment and why it’s important to care for it.

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Blue Letter

INSERT LOGO and address

Dear Families,

Currently we’re learning about the colour blue. Colours are all around us and by exploring colours we can help children become more aware of them and the ways certain colours are associated with different feelings, temperatures and events. Blue, for example, is often used to denote sadness, cold and music.

The following are some of the experiences we have planned to promote this learning:

* Setting up a paint-store in the dramatic play area
* Finger-painting with blue paint
* Making new colours using blue paint eg mixing blue with yellow to make green
* Having a blue ‘Show and Tell’ day where children are asked to bring a blue item from home eg a toy, clothes, figurine etc
* Getting children to act out the different connotations associated with blue eg feeling blue, cold etc
* Exploring how blue is used and portrayed in other countries and cultures
* Making a blue collage.

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. Here are some suggestions for blue related activities children may enjoy at home:

* Adding a small amount of blue food colouring to a child’s snack
* Mixing different colours to see which ones make blue
* Get children to count the number of blue cars they see on road trips
* Searching for blue in the natural environment eg flowers, insects

Have fun discovering the colour blue with your child!

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Bubbles Letter

INSERT LOGO and address

Dear Families,

Currently we’re learning about bubbles. All children love bubbles and we aim to provide many fantastic and fun learning experiences for your child.

Some activities we have planned at the service to promote this learning include:

* Washing dolls and dishes in the wet-area
* Testing many bubble solution recipes
* Creating bubble prints
* Making bubbles with common everyday items
* Making bubble-wands.

We also believe it’s important to create a link between learning undertaken at our Service and activities you may do with your child. Here are some bubble-related activities you may want to organise:

* Pouring bubble-bath into your child’s bath, and letting them play with the bubbles and any bath-toys they have
* Letting your child help you wash up to help your child understand how bubbles are used for cleaning. It will also give them a sense of responsibility and improve their self-esteem
* Preparing bubble solution (one cup of water and two table-spoons of liquid dishwashing detergent) and blowing bubbles with your child.

Children will love the time spent with you discovering bubbles. It is fun and a little messy, just what every child wants!

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Buildings Letter

INSERT LOGO and address

Dear Families,

Currently we’re learning about different buildings. Children are familiar with lots of buildings, including their home, grandparent’s homes, the library, and our Service. We aim to provide experiences that encourage children to discover how different buildings have different uses and features. We may also explore how buildings are constructed and learn about the people who construct them.

Some activities we have planned at the service to promote this learning include:

* Providing various open ended materials for children to build with, including boxes, milk cartons, building blocks etc
* Making a collage of items found on a building site
* Playing with Lego
* Setting up a building site in the dramatic play area.

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. Here are some suggestions for activities related to building children may enjoy at home:

* Pointing out important buildings in your community eg police station, hospital, fire station, theatre, sports club etc
* Driving or walking past any nearby construction sites and pointing out equipment and workers. Do this several times so your child can see building progress.

Children are very interested in the world around them. Learning about buildings helps a child to become more aware of the world around them as the environment changes or grows.

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Christmas Letter

INSERT LOGO and address

Dear Families,

Christmas is fast approaching! Santa, and what he will bring, is on the minds of many children. At the service we will be participating in many Christmas activities. The children will learn the colours, plants and symbols that are associated with Christmas in Australia and also about a White Christmas in Northern Hemisphere countries. While we’re aware that not all families celebrate Christmas, or celebrate Christmas in a secular (non-religious) way, we believe it’s important for children to learn about and respect other people’s beliefs. However, if you would prefer your child did not participate in Christmas activities, please let us know.

A few of the Christmas activities we have planned include:

* Making hand-made ornaments which children can choose to take home or hang on our tree
* Designing Christmas cards
* Learning Christmas carols
* Reading Christmas stories.

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. You may like to organise the following activities:

* Letting your child help wrap gifts and decorate the tree
* Talk to your child about a similar holiday within your own culture if you do not celebrate Christmas
* Going for a walk or drive to look at Christmas lights
* Singing Christmas carols.
* Writing a letter to Santa.

An understanding of Christmas, even if you do not celebrate the holiday, helps children identify with their local community and have a greater understanding of cultures that may be different to their own. Merry Christmas from all educators!

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Dentist Letter

INSERT LOGO and address

Dear Families,

Currently we’re learning that dentists are people who help keep teeth healthy, and about the importance and techniques of proper dental care. Children are often very aware of teeth. Many of our 5 year olds have started to lose teeth or will start soon and our younger children are teething.

Some of the experiences we have planned to promote this learning include:

* String paintings using dental floss
* Painting with discarded toothbrushes
* Learning about different types of foods and why some are good for teeth and some aren’t
* Exploring tools that a dentist uses.

At home, it’s important you help your child brush their teeth twice a day until they’re at least 8 years old. You should then continue to supervise teeth brushing so children learn the correct way to brush and understand how important it is to look after their teeth. Once adult teeth come in they must last a lifetime!

Helping your child learn how to correctly take care of their teeth will also give your child a sense of responsibility and promote their self-esteem.

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Educator Feedback Questions

1. How do you feel children have responded to this learning?

1. Was there any particular activity that children really liked Yes/No
2. If yes, what was it?

1. Could we improve learning about <insert topic>? Yes/No
2. If yes, how?

Educator Name: Educator Signature:

Date:

# Curriculum Topic Flowers Letter

INSERT LOGO and address

Dear Families,

As spring arrives and all the flowers start to bloom, the children have become interested in flowers so we’re currently learning more about them. Children will learn about the care, uses and parts of flowers and explore the ways insects interact with flowers eg pollination.

They will also learn about places where different types of flowers grow and why, along with the names of flowers and some of their cultural connotations.

Some experiences we have planned to promote this learning include:

* Observing and measuring plants and flowers in our Service garden
* Watering our garden
* Making paper shadings of different flowers and leaves
* Planting seeds
* Visiting local nurseries
* Changing the colour of some flowers using coloured water
* Smelling different flower scents.

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. Here are some suggestions for activities related to flowers children may enjoy at home:

* Working with your child in the garden
* Taking your child to the local park and pointing out different types of flowers and plants
* Letting your child help arrange flowers in a vase
* Pointing out different flowers in story books
* Talking about different flower colours, textures, scents etc.

These learning experiences will help children become more aware of the natural world around them.

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Friends Letter

INSERT LOGO and address

Dear Families,

Currently we’re learning about friends. This includes things like finding new friends, maintaining friendships, having friends in all age groups and even animal friends. At the service, children have made many new friends who they are learning to cooperate, work and play with.

Some activities we have planned at the service to promote this learning include:

* Making cookies for our friends
* Making arts and crafts for our friends
* Creating a friendship chain with strips of paper
* Making a photo album of children with their friends

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. Here are some suggestions for activities related to friendships children may enjoy at home:

* Inviting a friend around to play
* Looking at photo albums of family friends and relatives
* Reading books or watching movies about friendships

These learning experiences will help children become more aware of what a friend is and activities you can do with a friend. They will also learn how to interact with people and the importance of being social.

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Fruits and Vegetables Letter

INSERT LOGO and address

Dear Families,

We are currently learning about fruits and vegetables. While we know it’s sometimes hard to get children to eat them, we always promote healthy eating at our Service and encourage children to see fruits and vegetables as fun and tasty foods. During our current activities we will teach children fruit and vegetable names, their forms and the places they grow.

Some experiences we have planned to promote this learning include:

* Planting vegetable seeds
* Playing the role of a gardener/farmer in the dramatic play area
* Creating a collage of vegetables
* Vegetable/fruit stamping paintings
* Holding a fruit and vegetable tasting party during a snack time
* Creating a chart of everyone’s favourite vegetables and fruits.

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. At home, there are many ways you can incorporate this learning into your family’s life, including for example:

* Asking your child what vegetables and fruits they have tried recently. (This will also help your child develop memory and language skills)
* Letting children help prepare fruit and vegetables to be eaten raw or cooked. (They are more likely to try new foods if involved in food preparation/cooking.).

These learning experiences will hopefully help children discover that vegetables and fruits are not just nutritious but fun and tasty food too!

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Hats Letter

INSERT LOGO and address

Dear Families,

We are currently learning about different types of hats and how they’re used to support our identity (eg in different occupations or roles), used for decoration and used for protection. As part of our learning we’ll emphasise the importance of wearing hats to protect ourselves from the sun’s UV rays.

Some of the activities we have planned to promote this learning include:

* Setting up a hat store in the dramatic play area
* Making hats in the arts and crafts area
* Reading books about hats
* Learning to identify certain people by the hats they wear eg police officers, fire fighters, chefs
* A hat day planned for <insert date.>. The children will wear and show hats they have brought from home. If your child wishes to bring a special hat, please label the hat with your child’s name and send it to the service in their bags.

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. At home, you might like to search the wardrobes and talk about the different types of hats you have. Who owns the hat? Does it hold any sentimental value or cultural significance? What is it made out of?

These learning experiences will teach children about different cultures, sun protection and identification. Children will learn that everyday objects often have more meaning than they first think.

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Health Letter

INSERT LOGO and address

Dear Families,

We are currently learning about health. Health is a very broad topic and we will be covering aspects like healthy eating, hygiene and exercise.

We have planned the following experiences to promote a healthy lifestyle:

* Creating ‘pantries’ full of healthy food in our art area
* Learning about allergies and how they can affect some people
* Learning about germs, how they spread and how hygiene practices can stop them spreading
* Tracing our bodies in the art-corner
* Making some healthy snacks
* Exercising in many different ways including running, skipping, hoping, animal movements etc
* Weighing and measuring ourselves
* Reading books about healthy lifestyles

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. At home, you could ask your child to help prepare healthy food (eg washing fruit/veggies, tossing salads, layering pizzas) and to participate in fun exercise activities with you (eg cycling, swimming, playing hide and seek.)

These learning experiences will help your child develop an understanding and awareness of the importance of healthy lifestyles.

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Music Letter

INSERT LOGO and address

Dear Families,

We are currently learning about music. Music is a universal language. It is a way for a person to communicate and express their feelings. For young children, singing is not that much different from talking – as I’m sure you’ve noticed! Music allows children to get in touch with their imagination and bodies. If you play an instrument and would like to give a demonstration, please call us to arrange a suitable time. Children love it when family members come into the service.

Some experiences we have planned to engage your child in music include:

* Making musical instruments
* Painting while listening to music
* Learning dances and also letting children dance freely
* Forming a rhythm band outside, with each child having a chance to be the leader and create a beat.

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. To continue the musical theme at home, you may like to:

* Create musical instruments out of everyday items in the home. Bottles are always good
* Listen to and discuss some of your favourite music with your child
* Sing songs
* Dance with and without music

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Numbers Letter

INSERT LOGO and address

Dear Families,

We are currently learning about numbers, including how they’re used. Early numeracy also involves learning about patterns, shapes, angles, speeds etc in a fun, play oriented way.

Some of the experiences we have planned to promote this learning include:

* Measuring with scales and rulers at the science table
* Creating charts and graphs
* Making ‘number groups’ when playing outside eg an educator calls out “four” and the children must make a group of four
* Using number cookie cutters in play-dough
* Making collages of numbers
* Building marbles runs and car ‘speedways’
* Exploring maps

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. Some numerical experiences you could plan to have with your child include:

* Cooking with your child and letting them count out and measure ingredients
* Teach your child to count in your home language if you speak another language
* Getting your child to count the number of a certain object they see on trips outside the home
* Finger painting numbers with your child to help them develop writing skills without focusing on trying to hold a pencil as well
* Identifying patterns you see
* Identifying house/shop numbers

These activities will promote an understanding of how important numbers are in everyday life. Have fun counting and learning with your child!

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Occupations Letter

INSERT LOGO and address

Dear Families,

We are currently exploring the wide world of occupations. We will be looking at the variety of jobs people perform, including in the areas of communication, construction, education, health care, manufacturing, retail, social work, sports management and transportation. If you would like to come in and talk about your occupation with the children or give a demonstration, please don’t hesitate to contact the Nominated Supervisor so we can arrange a time to do this. Children love having a family member at the Service.

Some experiences we have planned to promote this learning include:

* Dress-ups and role plays
* Listening to stories about occupations
* Designing a job chart for our classroom
* Making occupation hats.

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. At home, you could continue exploring occupations with your child by:

* Talking about your job and what you do
* Playing a guessing game about careers. Point to an object, for example, a hammer, and ask your child to think about who would use a hammer in their job

Take your child to visit your workplace.

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Pets Letter

INSERT LOGO and address

Dear Families,

Children are always curious about animals and currently we’re learning more about pets. We will be exploring what animals people usually keep as pets, caring for pets, learning what pets eat along with the characteristics, movements and sounds of different pets. We will also cover how to be safe around dogs, and the occupations involved in caring for animals.

Some of the experiences we have planned to promote this learning include:

* Creating a dog-kennel for the dramatic play area
* Reading books about pets
* Drawing pictures with animals
* Visiting our local animal shelter/pet store
* Bringing some of our pets into the centre to visit.

If you work with animals, or would be interested in bringing your pet in for ‘show and tell’, please let us know so we can organise an appropriate time for you to visit.

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. At home, you could complete the following activities related to pets:

* Involving your child in the care of any pets you may have
* Providing magazines and newspapers for your child to create a collage of animals
* Talking about the pets you see on outings

Pets provide many benefits related to health and wellbeing. However, there are many factors to consider before adding a pet to you family. Pets require an investment in time as well as money in order to be healthy and happy. Consider also things like allergies, yard-space and expenses associated with owning a pet.

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Puppets Letter

INSERT LOGO and address

Dear Families,

This week we are focussing on puppets. Young children find puppets magical and motivating, and we will be exploring the different types, kinds and movements of puppets. We also plan to teach the children about the cultural relevance of different puppets.

Some experiences we have planned to promote this learning include:

* Creating our own puppets out of a variety of materials
* Making a puppet theatre out of a large appliance cardboard-box and using it to put on puppet plays
* Exploring various types of puppets including marionette, finger, hand, stick and shadow puppets
* Pretending to be marionette puppets and moving around like puppets on strings.

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. At home, you may enjoy the following with your child:

* Making some simple puppets
	+ Paper-Bag Puppets made from brown paper bags and decorated with crayons
	+ Sock Puppets made from those loose socks lying around. You could buy some craft material for your children to make a face
	+ Stick Puppets made by attaching decorated construction paper or a paper plate to a ruler or other type of stick.
* Making up original stories or re-telling stories with puppets
* Encouraging your child to put on a puppet show for you and other family members.

By using puppets in their play, children will be able to express themselves creatively and imaginatively. Enjoy your child and their puppets!

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Safety Letter

INSERT LOGO and address

Dear Families,

We are focusing on safety this week. Our aim is to make children more aware of the world around them and also aware of their physical feelings when they feel safe and unsafe.

We will be providing the following activities related to safety:

* Teaching children about different road safety signs
* Learning about stranger danger
* Reading books about safety
* Creating a book full of safety messages for our book corner
* Learning about what we can if we feel unsafe

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. At home, you can reinforce our safety message by:

* Pointing out safety signs to your child
* Giving your child safety tips during your daily routine
* Reading books about safety.

Helping your child learn about safety will enable them to become more aware of the world around them. Stay safe!

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Shapes Letter

INSERT LOGO and address

Dear Families,

We are currently exploring shapes. Our world consists of shapes in many sizes and forms, and we will be teaching children about the different shapes within our world and letting them become familiar with the names, classification and characteristics of these shapes.

Some experiences we have planned to promote this learning include:

* Making shapes with our bodies
* Making and baking cookies of various shapes
* Making shapes using play dough
* Painting shapes
* Indentifying shapes within the local community
* Identifying shapes during construction activities.

Each day we will be focussing on a certain shape. We’d love it if you could spend a few minutes looking around your house with your child for an object of that shape they can bring in. The shape-days are:

|  |  |
| --- | --- |
| *Day* | *Shape* |
| Monday | Square |
| Tuesday | Circle |
| Wednesday  | Rectangle  |
| Thursday | Triangle |
| Friday | Oval |

Please label the object with your child’s name.

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. You could participate in the following activities, for example, to reinforce our shape curriculum:

* Discuss the shape of objects in your home
* Discuss how some things used for the same purpose are different shapes eg some dinner plates are round and others are square
* Ask your child to pass the round/square/rectangular etc object

Helping your child learn about shapes will give them a greater understanding of the world around them and what it is made up of. Have fun with your child!

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Sports Letter

INSERT LOGO and address

Dear Families,

We are currently focussing on sports. Children love the chance to be active and also begin to learn the rules of sports they may see other people play. We aim for children to become familiar with different types of sport including the equipment used, clothing worn and the participants. We will also be talking about the health benefits of sport.

Some experiences we have planned to promote this learning include:

* Exploring the balls used in a variety of different sports
* Trying on a variety of clothes and safety equipment used in different sports
* Participating in a variety of sports
* Graphing our favourite sports.

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. You may enjoy sports related activities like:

* Looking through sports magazines or online sports articles and discussing the equipment used or clothing worn. This will help with your child’s observation skills
* Watching sport as a family and discussing the events
* Participating in sport as a family. Your child will enjoy spending time with the family.

Enjoy playing sport with your child! Remember, it’s not how good you are, but the effort you put in!

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Spring Letter

INSERT LOGO and address

Dear Families,

After the cold months of winter, spring is finally here! You can feel it in the sun and see it as plants and flowers begin to bloom. As you may have guessed, spring is the subject we’re exploring this week. Throughout the week we will be exposing the children to the many changes that take place during spring as well as common spring activities across a number of cultures. We will also be focussing on spring animals, plants and insects.

Some experiences we have planned to promote this learning include:

* Planting grass seeds in eggshells
* Planting seeds in the playground
* Making a collage of “Spring”
* Reading books about Spring and how other cultures celebrate Spring.

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. To continue this theme at home, you could complete the following activities with your child:

* Plant fast growing vegetables like cress and alfalfa
* Involve your child in cooking at home using spring fruit and veggies
* Save seeds from fruits such as oranges or apples and plant them
* Collect spring flowers and put in a vase.

Please remember to send your child in clothes that are weather appropriate, including a hat for spending more time in the sun. Also, if you provide bedding for your child make sure it is weather appropriate.

Have fun with your child discovering spring!

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Spring Letter

INSERT LOGO and address

Dear Families,

After the cold months of winter, spring is finally here! You can feel it in the sun and see it as plants and flowers begin to bloom. As you may have guessed, spring is the subject we’re exploring this week. Throughout the week we will be exposing the children to the many changes that take place during spring as well as common spring activities across a number of cultures. We will also be focussing on spring animals, plants and insects.

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* Save seeds from fruits such as oranges or apples and plant them
* Collect spring flowers and put in a vase.

Please remember to send your child in clothes that are weather appropriate, including a hat for spending more time in the sun. Also, if you provide bedding for your child make sure it is weather appropriate.

Have fun with your child discovering spring!

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Summer Letter

INSERT LOGO and address

Dear Families,

Summer is fast approaching and we are currently focussing on learning more about this season. Summer is a favourite time of year for most children and we have planned a curriculum based on summer weather, activities, holidays and clothing.

Some experiences we have planned to promote this learning include:

* Trying on shorts, sunglasses and sandals in the dramatic play area
* Learning about sun protection eg sunscreen, clothes, shade, UV levels
* Preparing frozen fruits
* Eating a picnic lunch.

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. At home, you could reinforce summer concepts by:

* Planning a family day out and involving your child in preparing for it
* Taking part in or observing a typical summer activity like swimming, going on a picnic, bike-riding or camping
* Ensuring your child wears a hat in the sun.

Please remember to send your child in clothes that are weather appropriate, including appropriate sun protection clothes. Also, if you provide bedding for your child make sure it is weather appropriate.

Enjoy summer with your child!

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Transportation Letter

INSERT LOGO and address

Dear Families,

Currently we’re learning about transportation. Cars, trucks and buses are vehicles that your child sees on a daily basis. By participating in activities we have planned, children will learn that there are many different sizes, shapes, colours and kinds of buses, trucks and cars. We will also be teaching children about caring for the inside and outside parts of a car.

Some activities we have planned at the service to promote this learning include:

* Painting with small cars at the art table
* Engaging with many books on cars, trucks and buses
* Setting up a petrol station in the play area
* Identifying emergency vehicles
* Building box cars that the children can ‘drive’
* Teaching children safety measures for each vehicle eg wearing seatbelts, holding on to a rail/pole if standing on a bus.

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. At home you could do the following activities to reinforce the concepts of cars, trucks and buses at the service.

* Pointing out emergency vehicles when you’re driving, and explaining why you have to get out of their way if they have their sirens on
* Letting your child help wash your vehicle
* Taking your child with you to the petrol station and talking about the different types of vehicles that come and go while you’re filling up.

Teaching children about cars, trucks and buses, their uses in society and how to be safe when using them will increase your child’s interest and awareness of the world around them.

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Trees Letter

INSERT LOGO and address

Dear Families,

We are currently learning about trees. Trees are an essential part of the environment for lots of reasons, including those related to our climate and environmental sustainability. Through the experiences planned children will become more aware of the parts of a tree, kinds of trees and the importance of trees.

Some experiences we have planned to promote this learning include:

* Creating leaf and bark rubbings
* Cooking with foods from trees
* Creating a book on trees for the book corner
* Listening to stories about trees
* Planting a tree in our garden and caring for it
* Watching video about the ways trees ‘breathe’.

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. Some activities you could undertake with your child in relation to trees include:

* Walking around your home and indentifying everything made of wood
* Letting your child help polish/clean wooden furniture
* Getting your child to count the trees they can see from a particular window in your house
* Going on a bush-walk
* Talking about the animals that live in trees near your home.

Enjoy discovering trees with your child as they learn about the natural environment!

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Water Letter

INSERT LOGO and address

Dear Families,

All living things have one thing in common - a need for water. We’re currently learning more about water and aim for children to become familiar with the various purposes and uses of water. We’ll also learn about ways to save water.

Some experiences we have planned to promote this learning include:

* Putting celery stalks in coloured water to observe what happens
* Experimenting with objects that sink or float
* Washing dolls and dishes
* Looking at books about water
* Talking about droughts and ways to conserve water
* Exploring water sports.

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. You could explore more about water by:

* Letting a child help with the washing-up after a meal
* Providing water and large paintbrushes for your child to paint walls or fences with water
* Letting your child stay in the bath a bit longer than normal and play with bath-toys
* Talking with your child about any water-saving devices in your home, and why it’s important to save water.

Have fun with your child discovering water and how important it is!

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Curriculum Topic Winter Letter

INSERT LOGO and address

Dear Families,

Brrr! It’s starting to get colder. Winter is upon us and we are currently exploring this season in more detail. Children will learn about winter by looking at winter clothing, weather characteristics, typical winter activities and winter sports.

Some experiences we have planned to promote this learning include:

* Listening to stories about winter
* Keeping a graph of the temperate each day
* Cooking typical winter foods such as soup
* Making a collage about winter
* Trying on appropriate winter clothing in the dress-up area
* Making pretend snow.

We believe it is important to create a link between learning undertaken at our Service and activities you may do with your child. You could complete the following activities to continue our winter theme:

* Talk with your child about summer and winter clothes and bedding – especially if you are putting warmer doonas etc on your beds
* Reading books about winter
* Letting your child help prepare typical winter foods
* Explain to your child why you may be using heaters or fireplaces and the safety rules eg no placing clothes over the top of heaters

Enjoy winter with your child and remember to stay warm!

Sincerely,

<insert name of Room Leader>

Room Leader

Ph <insert number>

<insert date>

# Emergency Rehearsal Letter

<INSERT LOGO>

Dear <INSERT NAME>

I am writing to let you know we will be holding a practice emergency drill at <INSERT TIME> on <INSERT DAY> the <INSERT DATE and YEAR>.

It is a requirement under the Early Childhood Regulations that we rehearse our responses to potential emergency situations at least once every three months.

Everyone present at the service, including all children and adults, are required to participate in the rehearsal so they become familiar and comfortable with the procedure and we can identify areas for improvement.

We take the safety of our children, employees and visitors very seriously, and welcome any feedback you may have on our emergency procedures.

As always, please don’t hesitate to contact me if you have any questions.

Kind Regards

<insert name of Nominated Supervisor>

Nominated Supervisor

Ph <insert number>

<insert date>

# Enquiry Letter

INSERT LOGO and address

<insert Parent Name>

<insert Address Line 1>

<insert Address line 2>

Dear <insert Parent Name>

Thank you for your enquiry today about our centre.

We pride ourselves on providing a safe, nurturing and caring environment where each child is treated as an individual. We also value the professional relationships we build with families, and understand strong partnerships always improve outcomes for children.

Our wonderful team of educators have lots of fun developing a curriculum based on each child’s strengths, interests, culture and needs.

If you haven’t done so already, I encourage you to book a time to tour the centre, talk to educators and see some of the amazing learning activities children participate in. Even our babies enjoy fun, stimulating activities suitable for their age and development.

If you have any questions or concerns please don’t hesitate to contact me on <insert phone number>. We’d love to welcome you to our centre as part of the <insert centre name> family.

Regards

Insert Name

Nominated Supervisor

Insert Phone number

Insert Date

# Enquiry Letter OSHC

INSERT LOGO and address

<insert Parent Name>

<insert Address Line 1>

<insert Address line 2>

Dear <insert Parent Name>

Thank you for your enquiry today about our centre.

We pride ourselves on providing a safe, nurturing and caring environment where each child is treated as an individual. We also value the professional relationships we build with families, and understand strong partnerships always improve outcomes for children.

Our wonderful team of educators have lots of fun organising activities and leisure experiences based on each child’s strengths, interests, culture and needs.

If you haven’t done so already, I encourage you to book a time to tour the centre, talk to educators and see some of the amazing activities children participate in.

If you have any questions or concerns please don’t hesitate to contact me on <insert phone number>. We’d love to welcome you to our centre as part of the <insert centre name> family.

Regards

Insert Name

Nominated Supervisor

Insert Phone number

Insert Date

# Enrolment Enquiry No Enrolment Survey

Thank you for your enquiry about a place at our service on <insert date>. To ensure the continuous improvement of our service practices, we would appreciate you taking a minute to complete the attached survey. Please return to the service in the attached self-addressed envelope or scan and email to <insert email address.>

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **yes** | **no** | **n/a** | **Comments** |
| I could easily contact the centre  |  |  |  |  |
| My phone enquiry was answered promptly and courteously  |  |  |  |  |
| My enquiry email was answered promptly and courteously |  |  |  |  |
| My enquiry at the centre was answered courteously  |  |  |  |  |
| Following my phone call or email enquiry, I received an information package within 7 days  |  |  |  |  |
| I was given an information package when I enquired at the centre |  |  |  |  |
| I received a follow up call within 7 days of my initial enquiry  |  |  |  |  |
| The staff member responding to my enquiry answered all my questions |  |  |  |  |
| The staff member responding to my enquiry asked If I’d like to book a tour of the service |  |  |  |  |
| I visited the service, was shown around the rooms, introduced to staff and someone explained the service and room routines |  |  |  |  |
| **If you toured or visited the service, please tick under the relevant rating for the following** | **excellent** | **very good** | **good** | **poor** | **n/a** | **Comments**  |
| What were your first impressions of the indoor premises? |  |  |  |  |  |  |
| What were your first impressions of the outdoor premises? |  |  |  |  |  |  |
| What were your first impressions about the presentation of the room your child would be placed in? |  |  |  |  |  |  |
| What were your first impressions of the educators in the room your child would be placed in? |  |  |  |  |  |  |

If you have decided not to enrol your child at our centre, please write reasons why below:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please note any other comments below:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (optional) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you for your time.

# Enrolment Offer Letter

INSERT LOGO and address

Name

Address Line 1

Address line 2

Dear <insert name>

I’m writing in relation to an enquiry you made about a place at our centre. Unfortunately we did not have any available vacancies at the time. However we’re currently taking enrolments for <insert year>. Please complete and return the attached form outlining your enrolment preferences if you’re still interested in taking a place. If we can accommodate your preferences we will then confirm your child’s booking in writing and forward a full enrolment form and supporting documentation.

OR

As your child’s name is currently on our waitlist, I’m writing to advise we are currently taking enrolments for <insert year>. Please complete and return the attached form outlining your enrolment preferences. If we can accommodate your preferences we will then confirm your child’s booking in writing and forward a full enrolment form and supporting documentation.

Please let us know if you no longer require a place at our Centre.

We are looking forward to sharing a stimulating, educational, loving and fun environment with your child, and to working in partnership with you and your family.

Please feel free to contact me if you would like to discuss any issue.

Kind Regards

<insert Nominated Supervisor’s Name>

Nominated Supervisor

<insert phone number>

<insert email>

<insert date>

# Enrolment Past Enquiry Letter

INSERT LOGO and address

<insert Parent Name>

<insert Address Line 1>

<insert Address line 2>

Dear <insert Parent Name>

You have previously enquired about a place at our service and at that time we were unable to meet your particular needs.

A place has recently become available and we would like to offer you the opportunity to secure this position if you are still interested.

We always try to accommodate families who have made enquiries in the order in which those enquiries were received. As you’re aware however, we have limited places available and there is a high demand for these.

Please advise us no later than <insert date> by phone on <insert number> or email <insert email address> if you wish to take up this offer.

If you have any questions, or would like to visit the centre, please feel free to call me on <insert phone number>.

Regards

Insert Name

Nominated Supervisor

Insert Phone number

Insert Date

# Enrolment Post Visit Letter

INSERT LOGO and address

<insert Parent Name>

<insert Address Line 1>

<insert Address line 2>

Dear <insert Parent Name>

We were pleased to meet you and <insert child’s name> when you visited our service today.

We value the relationships we build with our children and families, and make it a priority to ensure both groups feel a real sense of belonging at our service. From a child’s perspective, we understand how important it is that they feel safe, secure and loved, can participate in all activities and that their special interests are included in our learning activities. We encourage all our children to make suggestions and contribute their ideas, and we pay special attention to the cues and non-verbal communication of our babies.

We also enjoy being part of a community which includes our families, and encourage our families to be involved as much or as little as they wish in our service activities and operations. We regularly visit community facilities and organisations on excursions, and develop professional relationships with community organisations, including those providing child support and parenting services.

I hope you will be joining our service family soon. If you have any questions, or would like to visit the centre again, please feel free to call me on <insert phone number>.

Regards

Insert Name

Nominated Supervisor

Insert Phone number

Insert Date

# Enrolment Preferences

1. Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DOB \_\_\_\_\_\_\_\_\_\_\_\_

 Potential start date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Year child likely to start school \_\_\_\_\_\_\_\_\_\_\_

 **Preference 1**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Monday | Tuesday | Wednesday | Thursday | Friday |
|  |  |  |  |  |

 **Preference 2**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Monday | Tuesday | Wednesday | Thursday | Friday |
|  |  |  |  |  |

1. Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DOB \_\_\_\_\_\_\_\_\_\_\_\_

 Potential start date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Year child likely to start school \_\_\_\_\_\_\_\_\_\_\_

 **Preference 1**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Monday | Tuesday | Wednesday | Thursday | Friday |
|  |  |  |  |  |

 **Preference 2**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Monday | Tuesday | Wednesday | Thursday | Friday |
|  |  |  |  |  |

 **Other Children at Service**

 Child’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Days Attending**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Monday | Tuesday | Wednesday | Thursday | Friday |
|  |  |  |  |  |

 Child’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Days Attending**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Monday | Tuesday | Wednesday | Thursday | Friday |
|  |  |  |  |  |

# Enrolment Welcome Letter

INSERT LOGO and address

<insert Parent Name>

<insert Address Line 1>

<insert Address line 2>

Dear <insert Parent Name>

We are looking forward to <insert child’s name> commencing next week.

<Insert child’s name> will be in <insert room name> with Room Leader <insert Room Leader name> and educators <insert educators’ names>.

The Room Leader and educators will greet you and <insert child’s name> when you arrive (as they will every day you attend) and will help <insert child’s name> settle into the room routine as quickly and easily as possible.

We understand that <insert child’s name> (and his parents/family) may experience some anxiety and emotion being in an unfamiliar place with new people. This is completely normal, and if this occurs educators will attentively respond to and reassure <insert child’s name> during the settling in period. Educators may also have some tips and strategies to help <insert child’s name> feel safe and happy at our service. While some children take longer than others to settle, all soon develop a trusting and secure relationship with educators.

If you are concerned about <insert child’s name> wellbeing, please feel free to call the service, and rest assured we will call you if <insert child’s name> is unhappy or does not settle.

If you and <insert child’s name> have not previously visited <insert child’s name> room or educators, you are both welcome to do so before <insert child’s name> first day.

We look forward to sharing this very special time in your child’s life.

If you have any questions, or would like to visit the centre, please feel free to call me on <insert phone number>.

Regards

Insert Name

Nominated Supervisor

Insert Phone number

Insert Date

# Family Participation in Child’s Learning and Development Letter

INSERT LOGO and address

Dear families and caregivers,

Your ideas, experiences and skills are greatly valued and we encourage you to participate in our curriculum and service activities. There are many opportunities, both small and large, to help us extend your child’s learning and development, and your child will love having you present and sharing your knowledge, skills or talents with their friends. Note we also welcome grandparents and extended family members to our service. Here are just a few ideas.

***Occupations and Hobbies***

We welcome all parents to the Service to talk about their occupation or hobby (eg music, craft, cooking). Everything parents do interests children and these talks are some of the best educational resources you can give our Service. We use information from discussions about occupations and hobbies in our programming and the ideas explored from parent talks can last for weeks.

***Home Culture***

We encourage you to share aspects of your culture and family life with our children. Many of our learning outcomes are based on understanding of and respect for different cultures and ethnic backgrounds, and children (and staff) enjoy learning about different belief systems and ways of living. This may include, for example, learning about different foods and traditional meals. You may wish to lead a cooking activity.

***Reading***

Children love being read to. If you or your parents have the time please contact your room educators to organise a suitable for reading.

***Excursions***

We often need additional adults to help supervise children during excursions. This is a wonderful opportunity to share your child’s experiences in their local community, and to learn about their friends and social interactions. You’ll also get to see how we use these experiences to promote children’s learning, and how the experiences often lead to the many varied topics we explore.

***Recyclables***

We’re always on the lookout for clean, recyclable items like empty food containers, ribbons, wrapping paper, towel tubes (not toilet, egg or milk because of hygiene and allergy issues), paper and anything interesting from your work. All contributions are much appreciated and will be used by the children as they create, imagine, explore, hypothesise etc. Keep a look out for their amazing work!

***Family Photos***

We love displaying family photos, and welcome all your contributions. Not only do the photos create a warm, friendly and homely environment, they may also prompt activities and experiences related to the photos’ content. This is ideal for children’s learning and development, as children are likely to be engaged in an activity related to their interests, strengths or everyday lives.

If you would like more information about how you can participate in your child’s learning, please let me know or discuss with your child’s Room Leader. Please remember, you are always welcome to visit or call the Service at any time.

Sincerely,

<insert name of Nominated Supervisor>

Nominated Supervisor

Ph <insert number>

<insert date>

# Family Participation in Curriculum Letter

INSERT LOGO and address

Dear families and caregivers,

Do you have a special talent or skill? Do you have an interesting hobby? Would you like to share an element of your culture with our Service? Maybe you would love to come and read to the children. If so, we would like to hear from you!

It is important for families to play a role at our Service and we welcome and encourage your involvement. Everything parents do interests children, and parent involvement and information about what your family is doing is the best educational resource you can provide for the Service. Family participation gives children new experiences including involvement in different cultures. It also allows children to interact with new people and learn new skills. We use information that has come from family interactions and discussions of hobbies, jobs etc in our curriculum and the ideas explored can last for weeks.

We would like to extend an open invitation to family members to come in and talk to the children about their job or hobby, put on a demonstration, or run an activity (eg craft, dance, singing, reading). Please outline what you would be interested in doing below and also advise the days and dates you are available.

Please return the form to your child’s Room Leader or the Nominated Supervisor. If you would like more information about how you can participate in your child’s learning, please let me know or discuss with your child’s Room Leader. Please remember, you are always welcome to visit or call the Service at any time.

Sincerely,

<insert name of Nominated Supervisor>

Nominated Supervisor

Ph <insert number>

<insert date>

Parent Name:

Activity/Demonstration:

Days, dates and times you are available:

# Fee Arrears Letter

INSERT LOGO and address

<insert Parent Name>

<insert Address Line 1>

<insert Address line 2>

Dear <insert Parent Name>

As outlined in our Fees Policy, all fees for education and care must be paid on time every week.

I have noticed that you currently have outstanding fees totalling <insert amount.>

We require immediate payment of this amount by close of business <insert day and date.>

If there are any circumstances affecting your ability to pay weekly fees on time, please ring me on <insert phone number> as soon as possible for a confidential discussion including potential fee payment arrangements.

Please note that if you do not pay the outstanding amount by the due date, and do not ring me to discuss the matter, <insert child’s name> place at the service may be terminated and your bond credit applied to the outstanding amount.

I trust you will take urgent action to address the arrears. Please contact me if you have any questions.

Regards

Insert Name

Nominated Supervisor

Insert Phone number

Insert Date

# Fee Arrears Letter 2

INSERT LOGO and address

Dear Parent name – title and surname

I refer to several discussions we have had over the phone in recent weeks regarding your overdue account which is currently $amount in arrears.

We have taken your previous assurances that the outstanding amount would be paid in good faith. Regrettably none of the payments made have been cleared by your financial institution.

As you are aware, our Fees Policy clearly states that fees for education and care must be paid in full every week. It also states we may suspend your child’s place immediately if payments are regularly dishonoured by your financial institution. Unfortunately we must now advise that we are suspending the provision of education and care to child’s first and last name with immediate effect.

We urgently require you to clear the outstanding balance of $amount by insert day and date. Once payment has been made we would be happy to welcome child first name back to the centre to join his friends in insert room name provided fees are paid every week.

Please note that if payment is not made by insert day and date, we will have no option but to pass the debt onto our debt collection agency for action.

I trust you will take urgent action to address the arrears. Please contact me if you wish to discuss.

Regards

Insert Name

Nominated Supervisor

Insert Phone number

Insert Date

# Fee Increase Letter

INSERT LOGO and address

Name

Address Line 1

Address line 2

Dear Families and Carers

We pride ourselves on delivering high quality care and educational programs.

To enable us to continue to provide these, we review our fees in line with costs every July, consistent with general practice in the childcare industry.

We will be implementing a $<insert fee increase> increase across all rooms from <insert day, date and year>. The new full daily fee will be <insert daily fee> per day. Please note that any Child Care Subsidy (CCS) will continue to apply and will be reflected in invoiced fees.

Your payments will need to be adjusted from <insert day, date and year> to your new gap fee via your payment method such as Ezi-debit or centre pay.

We thank you for your ongoing support of the centre, and look forward to continuing to provide a safe and happy environment for your family.

Kind regards,

<insert name of Nominated Supervisor>

Nominated Supervisor

<insert date>

# Health Information Update Letter

INSERT LOGO and address

Dear Families and Carers

Children’s health needs are always changing. Please ensure you inform us as soon as possible of any new/changed health requirements your child has so we can ensure the safety and wellbeing of your child.

For *new* health needs we need a medical management plan signed by your child’s doctor to ensure we implement appropriate health care practices. For *changed* health needs the medical management plan we hold will need to be updated by your doctor. Please see our Medical Conditions Policy for more information on requirements for a Medical Management Plan.

The attached form allows you to provide us with a brief summary of your child’s new/changed health needs. Please note, however, that we must comply with your doctor’s instructions where we hold a current plan, and we require a plan to implement new health needs.

If you would like to speak privately to an educator or the Nominated Supervisor about your child’s health needs or the Medical Conditions Policy, please do not hesitate to contact us.

Kind regards,

<insert name of Nominated Supervisor>

Nominated Supervisor

<insert date>

1. Name of child:
2. Name of condition:
3. Please outline what has changed:

1. Please advise doctor’s details if these have changed

Name of Child’s Doctor/Medical Service:

Address of Service:

Telephone:

 Please attach the new or amended medical management plan

# Immunisation – Update Letter

INSERT LOGO and address

Dear families

We wish to remind you that your child’s next scheduled immunisation is now due.

It is important that your child’s immunisations are kept up to date so they have the maximum protection available against vaccine preventable infectious diseases.

Immunising your child also provides benefits to those in the community who are unable to be vaccinated due to age or medical issues.

Please provide us with a copy of your child’s recent immunisation record completed by their doctor or immunisation provider. When available we would appreciate an updated Immunisation Statement for your child from the Australian Childhood Immunisation Register.

Please also complete the attached and return if your contact details have changed since your child was enrolled or you last advised us.

If you have any questions or concerns please don’t hesitate to contact me on <insert phone number>.

Thank you

Insert Name

Nominated Supervisor

Insert Phone number

Insert Date

**Contact Information Update**

Child’s name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
|  | **Parent One** | **Parent Two**Where answer is same as Parent One write same |
| Surname |  |  |
| Given names |  |  |
| Home address |  |  |
| Home phone |  |  |
| Work phone |  |  |
| Mobile |  |  |
| Best contact number |  |  |
| Email |  |  |

# Key Words Home Language

INSERT LOGO and address

Dear parents/carers, to help educators support and communicate with your child/children, please complete the following key words in your home language.

Child’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age\_\_\_\_\_\_\_\_\_\_\_\_\_

Language(s) spoken at home\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| **KEY WORDS** |
| **Yes** |  | **Table** |  |
| **No** |  | **Chair** |  |
| **Eat** |  | **Outside** |  |
| **Lunch** |  | **Inside** |  |
| **Snack** |  | **Sleep** |  |
| **Drink** |  | **Rest** |  |
| **Water** |  | **Bed** |  |
| **Fruit** |  | **Play** |  |
| **Food** |  | **Fun** |  |
| **Toilet** |  | **Sit** |  |
| **Wee** |  | **Other** |  |
| **Hello** |  | **Other** |  |
| **Goodbye** |  | **Other** |  |
| **Mum** |  | **Other** |  |
| **Dad** |  | **Other** |  |
| **Friend** |  | **Other** |  |
| **Grandparent** |  | **Other** |  |

Please describe any other forms of communication that your child/children are familiar with eg visual aids, gestures etc

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is there any other information that would help your child/children communicate and settle at our service eg favourite songs or stories?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return this form to your child’s educator or with your enrolment form if your child is just starting at our service.

Thank you

<insert name of Nominated Supervisor>

Nominated Supervisor

Ph <insert number>

<insert date>

# Late Fee Letter

INSERT LOGO and address

<insert Parent Name>

<insert Address Line 1>

<insert Address line 2>

Dear <insert Parent Name>

As outlined in our Fees Policy which I’ve attached, late fees of <insert fee amount and how charged eg $15 for every 15 minutes or part thereof > apply if children are collected after normal closing time.

On <insert date> you collected <insert child’s name> at <insert time> and therefore you have been charged a late fee of <insert amount>.

You are required to pay this fee by <insert date and any other instructions>. Failure to do so will result in the termination of your child’s place at the centre.

Please do not hesitate to contact me if you wish to discuss this further.

Kind regards,

Insert Name

Nominated Supervisor

Insert Phone number

Insert Date

# Maintenance Family Letter

INSERT LOGO and address

Dear Families

During the period INSERT DATES AND YEAR our centre will be undergoing maintenance to <insert maintenance required eg to replace broken...., to upgrade our cooling system, to repair...>. This will occur in <insert location if relevant eg in our nursery room, outdoor environment>.

We have completed a risk assessment and will take all necessary measures to ensure the safety of our children, families and visitors. These measures include <insert measures eg barricading area so it’s inaccessible to children...>

We look forward to sharing <eg our new space/equipment/environment> with you.

Please let us know if you have any questions about our scheduled maintenance or would like to view our risk assessment.

Sincerely

<insert name of Nominated Supervisor>

Nominated Supervisor

Ph <insert number>

<insert date>

# Open Doors Poster

**O** Our Service can be accessed at any time for parental inspection.

**P** Please come and see how we help your child develop and grow.

**E** Entry by you any time shows that we are happy for you to see our practices at any time of the day.

**N** Never leave your child in a Service unless you feel 100% confident in their ability to provide for your child.

**D** Don’t hesitate to ask us any questions about your child, their development or our Service philosophy.

**O** Our Service is proud of the quality of care we provide.

**O** Our educators are qualified, trained, experienced and talented.

**R** Rather than take our word for this

**S** See for yourselves!

# Overdue Fees Letter

INSERT LOGO and address

<insert Parent Name>

<insert Address Line 1>

<insert Address line 2>

Dear <insert Parent Name>

This is a friendly reminder that your fees of <insert amount> are currently overdue.

Please contact the Office as soon as possible to make the payment, or advise when the payment will be made.

If you are having difficulty paying fees, please phone me as a matter of priority to discuss fee payment arrangements. Information will be treated as private and confidential.

If fees remain unpaid, and we do not hear from you by <insert date>, we may unfortunately need to terminate or suspend your child’s place at the centre.

Kind regards,

Insert Name

Nominated Supervisor

Insert Phone number

Insert Date

# Parent Questionnaire Child Information

INSERT LOGO and address

<Insert child’s name>

Dear families

We value the relationships we build with our families and the expert knowledge you have about your children. To ensure we can provide the best education and care, please answer the following questions. If we have asked you to do this previously, we have attached your last response. In this case please respond only to the questions where the answer has changed since last time.

1. **What does your child love doing at home?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. **What do they talk about when they come home from the service?**

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1. **Who do they talk about when they come home from the service?**

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1. **What do they watch on TV?**

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1. **What is their favourite music?**

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1. **What outside activities does your child do?**

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1. **Do you think your child has particular strengths in certain areas? If yes please provide details**

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1. **Do you think your child needs more assistance in certain areas? If yes, please provide details**

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1. **Does your child use any words or phrases that may not be used by other children? If yes please describe**

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1. **Does your child have naps during the day at home? If yes, when and how long for?**

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1. **What settling techniques do you use at home?**

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1. **Is your child learning to use the toilet at home? If yes please provide details**

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1. **What is the child’s favourite food(s) at home?**

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1. **Do you have a pet? If yes, what type of animal is it and what is the pet’s name?**

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1. **Does your child have a close relationship with their grandparents? If yes, what does your child call them?**

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1. **Does your child do any special activities with their grandparents? If yes what are they?**

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1. **Does your child have brothers and sisters? If yes please advise age and names**

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1. **What after school activities do the brothers or sisters do?**

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1. **Does your child have any close relationships with other family members? If yes please provide details?**

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1. **Please share any cultural practices the child participates in at home**

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1. **Has your child been diagnosed with a medical condition (eg asthma, anaphylaxis, diabetes) or health need we don’t know about? If yes please provide details**

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1. **Has your child’s medical condition or health needs changed since you last advised us? If yes please provide details**

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1. **Has your child’s medication changed since you last advised us? If yes please provide details**

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1. **Has your child had an immunisation since you last advised your child’s immunisation status? If yes please provide details**

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1. **What is your occupation?**

Mum \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dad \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Please share any other relevant information about your child with us.**

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1. **Do you have any comments or suggestions about your child’s education and care?**

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Thank you for completing this questionnaire

Please return to <insert educator’s name or location>

# Parent Questionnaire Child Information OSHC

INSERT LOGO and address

<Insert child’s name>

Dear families

We value the relationships we build with our families and the expert knowledge you have about your children. To ensure we can provide the best education and care, please answer the following questions. If we have asked you to do this previously, we have attached your last response. In this case please respond only to the questions where the answer has changed since last time.

1. **What does your child love doing at home?**

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1. **What do they talk about when they come home from the service?**

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1. **Who do they talk about when they come home from the service?**

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1. **What do they watch on TV?**

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1. **What is their favourite music?**

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1. **What outside activities does your child do?**

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1. **Do you think your child has particular strengths in certain areas? If yes please provide details**

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1. **Do you think your child needs more assistance in certain areas? If yes, please provide details**

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1. **Does your child use any words or phrases that may not be used by other children? If yes please describe**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. **What is the child’s favourite food(s) at home?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. **Do you have a pet? If yes, what type of animal is it and what is the pet’s name?**

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1. **Does your child have a close relationship with their grandparents? If yes, what does your child call them?**

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1. **Does your child do any special activities with their grandparents? If yes what are they?**

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1. **Does your child have brothers and sisters? If yes please advise age and names**

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1. **What after school activities does your child and their siblings do?**

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1. **Does your child have any close relationships with other family members? If yes please provide details?**

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1. **Please share any cultural practices the child participates in at home**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. **Has your child been diagnosed with a medical condition (eg asthma, anaphylaxis, diabetes) or health need we don’t know about? If yes please provide details**

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1. **Has your child’s medical condition or health needs changed since you last advised us? If yes please provide details**

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1. **Has your child’s medication changed since you last advised us? If yes please provide details**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. **Has your child had an immunisation since you last advised your child’s immunisation status? If yes please provide details**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. **What is your occupation?**

Mum \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dad \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Please share any other relevant information about your child with us.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. **Do you have any comments or suggestions about your child’s education and care?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Thank you for completing this questionnaire

Please return to <insert educator’s name or location>

# Parent Questionnaire Child and Parent Information

INSERT LOGO and address

Dear families

We value the relationships we build with our families and the expert knowledge you have about your children. To ensure we can provide the best education and care, please answer the following questions. If we have asked you to do this previously, we have attached your last response. In this case please respond only to the questions where the answer has changed since last time.

Child Name

Child’s siblings Date of birth

Other people living in home Relationship to child

Other family child has regular contact with Relationship to child

1. Please describe your child’s care experiences prior to coming here

eg family day care, nanny, other centre

1. Does your child have any fears or had any trauma?

eg spiders, dogs, thunder, confined spaces, accidents

1. Is there any further information that may help us understand your child better?

eg family situation, recent events

1. What are your child’s regular activities?

eg library, play group, swimming/sport class

1. Does your child sleep during the day? yes/no am/pm bed/cot

Comments:

1. Is your child breast fed? yes/no

Drinks formula yes/no

Drinks from cup/spout/bottle

Is your child toilet trained? yes/no

If toilet training does your child use a potty? yes/no

Is your child able to use a toilet? independently/with help

Parent Information

1. Please list any centre activities you would you like to participate in.

eg excursions, cooking, reading, daily learning activities

1. Please describe any hobbies or skills you would be willing to share with our children.

1. Would you be willing to share information about your job or workplace with our children? If yes, what do you do?

# Parent Questionnaire Curriculum Feedback

Child’s Name

Parent’s Name

Parent’s Signature

Date

Please take a couple of minutes to complete this survey. Please circle the number matching your response.

1. Strongly Disagree 2. Disagree 3. Neither Agree or Disagree 4. Agree 5. Strongly Agree

Your child’s learning experiences have helped them:

1 2 3 4 5 take on responsibilities

1 2 3 4 5 become more independent

1 2 3 4 5 respect other people

1 2 3 4 5 cooperate with others

1 2 3 4 5 make sensible choices about their health and safety

1 2 3 4 5 develop their physical skills

1 2 3 4 5 develop their oral language

1 2 3 4 5 develop their understanding of literacy and numeracy

1 2 3 4 5 learn how to be thinkers and problem solvers

1 2 3 4 5 use their imagination and creativity

1 2 3 4 5 learn about their environment.

Do you have any comments about how we can promote your child’s learning?

# Parent Questionnaire Curriculum and Routines

INSERT LOGO and address

Dear Families

Feedback from families is a gift for the Service. It allows us to know what we’re doing right, what we’re doing wrong and what could be improved. Please answer the brief questionnaire below and place in the survey box near the sign in/out sheet by <insert date>

1. Do you often receive information about your child’s achievements and when you drop off or collect your child? How can we improve the way we provide information?

1. Are we meeting your child’s individual needs/interests? For example, do we know how your child prefers to play? Please tell us how we can tailor our curriculum to maximise your child’s learning and development opportunities.

1. Do we do things differently at our Service than you do at home? We would like to ensure consistency between home and our Service as much as possible. Please let us know if your child follows a different routine/procedure at home.

1. Do you have any other comments or suggestions about how we can improve our Service routines, activities or curriculum?

Family Member’s Name (Optional):

Family Member’s Signature:

Date:

# Parent Questionnaire Enrolment and Orientation

INSERT LOGO and address

Dear Families

Feedback from families is a gift for the Service. It allows us to know what we’re doing right, what we’re doing wrong and what could be improved. Please answer this brief questionnaire about your child’s orientation below and place in the survey box near the sign in/out sheet by <insert date>

Overall how would you rate your child’s orientation to the service? (Please circle one)

Very Satisfied Satisfied Neither satisfied/dissatisfied Dissatisfied Very Dissatisfied

|  |
| --- |
| **Enrolment** |
| yes | no | Was the enrolment form explained and filled in completely with all relevant information about your child? |
| yes | no | Were you told what to bring when enrolling your child? (eg birth certificate, immunisation record and Medicare number )  |
| yes | no | Were you advised about arrangements for paying fees?  |
| yes | no | Were you told about the way we communicate with families (eg (newsletters, pockets, communication box etc)? |
| yes | no | Were you asked for your communication preferences? |
| yes | no | Were you advised about the importance of labelling children’s personal items  |
| yes | no | Did the Nominated Supervisor arrange for you and your child to visit the service, meet the staff and become familiar with the environment before your child’s first day? |
| yes | no | Were you encouraged to send any special comfort items (teddy etc) to help settle your child? |
| yes | no | Were you shown our family library/information area? |
| yes | no | Were you shown where to access service policies and procedures? |
| yes | no | Were relevant policies discussed with you? |
| **Orientation** |
| yes | no | If your child visited before their first day, did educators encourage your child to participate in the activities? |
| yes | no | Were you shown around the service and introduced to educators?  |
| yes | no | Did educators tell you about the daily routine and educational program? |
| yes | no | Did educators speak with you about any special requirements for your child?  |
| yes | no | Did educators discuss your child’s routines, fears, strengths, special words, toileting and sleeping practices? |
| yes | no | Did educators/Nominated Supervisor discuss how you could tailor your child’s settling in period eg initially attend for fewer hours? |
| **Settling in** |
| yes | no | Did educators encourage you to say goodbye before leaving?  |
| yes | no | Did educators reassure you that if your child was upset for a long time they would contact you? |
| yes | no | Were you able to stay as long as needed to reassure your child?  |
| yes | no | Were you invited to ring and check on your child at any time? |
| yes | no | Did educators reassure you that most children settle in quickly to their new environment? |
| yes | no | Did educators discuss how your child was settling in when you collected them?  |

What could we improve?

What did we do well?

Name (optional)

Date\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_

Thank you for taking the time to complete this questionnaire.

# Parent Questionnaire Enrolment and Orientation OSHC

INSERT LOGO and address

Dear Families

Feedback from families is a gift for the Service. It allows us to know what we’re doing right, what we’re doing wrong and what could be improved. Please answer this brief questionnaire about your child’s orientation below and place in the survey box near the sign in/out sheet by <insert date>

Overall how would you rate your child’s orientation to the service? (Please circle one)

Very Satisfied Satisfied Neither satisfied/dissatisfied Dissatisfied Very Dissatisfied

|  |
| --- |
| **Enrolment** |
| yes | no | Was the enrolment form explained and filled in completely with all relevant information about your child? |
| yes | no | Were you told what to bring when enrolling your child? (eg birth certificate, immunisation record and Medicare number )  |
| yes | no | Were you advised about arrangements for paying fees?  |
| yes | no | Were you told about the way we communicate with families (eg (newsletters, pockets, communication box etc)? |
| yes | no | Were you asked for your communication preferences? |
| yes | no | Were you advised about the importance of labelling children’s personal items  |
| yes | no | Did the Nominated Supervisor arrange for you and your child to visit the service, meet the staff and become familiar with the environment before your child’s first day? |
| yes | no | Were you shown our family library/information area? |
| yes | no | Were you shown where to access service policies and procedures? |
| yes | no | Were relevant policies discussed with you? |
| **Orientation** |
| yes | no | If your child visited before their first day, did educators encourage your child to participate in the activities? |
| yes | no | Were you shown around the service and introduced to educators?  |
| yes | no | Did educators tell you about the daily routine and educational program? |
| yes | no | Did educators speak with you about any special requirements for your child?  |
| yes | no | Did educators discuss your child’s routines, fears, strengths, special words, rest and relaxation practices? |
| **Settling in** |
| yes | no | Did educators encourage you to say goodbye before leaving?  |
| yes | no | Did educators reassure you that if your child was upset for a long time they would contact you? |
| yes | no | Were you able to stay as long as needed to reassure your child?  |
| yes | no | Were you invited to ring and check on your child at any time? |
| yes | no | Did educators discuss how your child was settling in when you collected them?  |

What could we improve?

What did we do well?

Name (optional)

Date\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_

Thank you for taking the time to complete this questionnaire.

# Parent Questionnaire Family Exit

INSERT LOGO and address

Dear <insert family’s name>

We will miss educating and caring for <insert child’s name>, and wish you and <insert child’s name> all the best in the future.

To help us continually improve our service practices, we would appreciate you taking a couple of minutes to complete the attached survey. We value your honest answers so please do not be concerned that your feedback will be viewed unfavourably. It is only by receiving honest feedback that we’re able to improve.

Please return to me when you’re next in the service or using the stamped self-addressed envelope attached for your convenience.

Kind regards,

<insert name of Nominated Supervisor>

Nominated Supervisor

<insert date>

**Family Exit Survey**

| **Issue** | **Excellent** | **Very Good** | **Good** | **Poor** | **N/A** | **Comments** |
| --- | --- | --- | --- | --- | --- | --- |
| **Child/ Educator Interactions** |
| Educators were always responsive to my child’s physical, health and educational needs  |  |  |  |  |  |  |
| Educators understood my child’s strengths and interests and included them in the curriculum |  |  |  |  |  |  |
| Educators valued my child as an individual |  |  |  |  |  |  |
| There was evidence that educators valued children’s ideas and views  |  |  |  |  |  |  |
| Educators made sure my child was included in all room activities |  |  |  |  |  |  |
| Educators always made sure my child was safe |  |  |  |  |  |  |
| Educators respected and valued our family culture eg through learning activities and invitations to share knowledge |  |  |  |  |  |  |
| **Parent/Staff Interactions** |
| Educators were always professional when interacting with me/my child |  |  |  |  |  |  |
| Educators and staff helped me locate services in the local community |  |  |  |  |  |  |
| My views and ideas were important to educators and staff |  |  |  |  |  |  |
| Educators always greeted me by name  |  |  |  |  |  |  |
| Educators were familiar with my job and family structure |  |  |  |  |  |  |
| Educators provided lots of information about my child’s progress towards achieving learning outcomes |  |  |  |  |  |  |
| Any information I provided about my child’s life outside the service, holidays, family etc was always used in learning activities |  |  |  |  |  |  |
| **Safety and Hygiene** |
| My child’s room was always clean and tidy |  |  |  |  |  |  |
| Hygiene practices like nappy changing, toileting and handwashing were always completed in line with displayed procedures |  |  |  |  |  |  |
| Other areas of the centre, including the gardens and outdoor play areas, were always clean and free of rubbish |  |  |  |  |  |  |
| Any broken equipment or resources were immediately removed or made inaccessible to children |  |  |  |  |  |  |
| I was always asked to authorise things like excursions, medication, other people collecting my child |  |  |  |  |  |  |
| **Staff Interactions** |
| Educators help and support each other |  |  |  |  |  |  |
| There was a positive/happy feeling in my child’s room |  |  |  |  |  |  |
| Educators were familiar with current parenting and teaching theory/advice |  |  |  |  |  |  |
| Educators were always willing to try new things  |  |  |  |  |  |  |
| **Service practices** |
| I was familiar with the service’s policies and procedures and knew where to find them |  |  |  |  |  |  |
| Changes to service practices were communicated well eg I always received communication in a timely manner |  |  |  |  |  |  |
| I felt able to approach educators or the Nominated Supervisor with any concern |  |  |  |  |  |  |
| My child’s room routine was always well organised and ran smoothly |  |  |  |  |  |  |
| Indoor and outdoor environments are attractive and promote children’s imagination and creativity  |  |  |  |  |  |  |

Thank you for helping us reflect on and work at continually improving our practices. If you would like to make any further comments please do so below.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (optional) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Parent Questionnaire Family Exit OSHC

INSERT LOGO and address

Dear <insert family’s name>

We will miss educating and caring for <insert child’s name>, and wish you and <insert child’s name> all the best in the future.

To help us continually improve our service practices, we would appreciate you taking a couple of minutes to complete the attached survey. We value your honest answers so please do not be concerned that your feedback will be viewed unfavourably. It is only by receiving honest feedback that we’re able to improve.

Please return to me when you’re next in the service or using the stamped self-addressed envelope attached for your convenience.

Kind regards,

<insert name of Nominated Supervisor>

Nominated Supervisor

<insert date>

**Family Exit Survey**

| **Issue** | **Excellent** | **Very Good** | **Good** | **Poor** | **N/A** | **Comments** |
| --- | --- | --- | --- | --- | --- | --- |
| **Child/ Educator Interactions** |
| Educators were always responsive to my child’s physical, health and educational/leisure needs  |  |  |  |  |  |  |
| Educators understood my child’s strengths and interests and included them in the curriculum |  |  |  |  |  |  |
| Educators valued my child as an individual |  |  |  |  |  |  |
| There was evidence that educators valued children’s ideas and views  |  |  |  |  |  |  |
| Educators made sure my child was included in all relevant activities |  |  |  |  |  |  |
| Educators always made sure my child was safe |  |  |  |  |  |  |
| Educators respected and valued our family culture eg through learning activities and invitations to share knowledge |  |  |  |  |  |  |
| **Parent/Staff Interactions** |
| Educators were always professional when interacting with me/my child |  |  |  |  |  |  |
| Educators and staff helped me locate services in the local community |  |  |  |  |  |  |
| My views and ideas were important to educators and staff |  |  |  |  |  |  |
| Educators always greeted me by name  |  |  |  |  |  |  |
| Educators were familiar with my job and family structure |  |  |  |  |  |  |
| Educators provided information about my child’s progress towards achieving learning outcomes |  |  |  |  |  |  |
| Any information I provided about my child’s life outside the service, holidays, family etc was always used in learning activities |  |  |  |  |  |  |
| **Safety and Hygiene** |
| My child’s room was always clean and tidy |  |  |  |  |  |  |
| Hygiene practices like handwashing were always completed in line with displayed procedures |  |  |  |  |  |  |
| Other areas of the centre, including the gardens and outdoor play areas, were always clean and free of rubbish |  |  |  |  |  |  |
| Any broken equipment or resources were immediately removed or made inaccessible to children |  |  |  |  |  |  |
| I was always asked to authorise things like excursions, medication, other people collecting my child |  |  |  |  |  |  |
| **Staff Interactions** |
| Educators help and support each other |  |  |  |  |  |  |
| There was a positive/happy feeling in my child’s room |  |  |  |  |  |  |
| Educators were familiar with current parenting and teaching theory/advice |  |  |  |  |  |  |
| Educators were always willing to try new things  |  |  |  |  |  |  |
| **Service practices** |
| I was familiar with the service’s policies and procedures and knew where to find them |  |  |  |  |  |  |
| Changes to service practices were communicated well eg I always received communication in a timely manner |  |  |  |  |  |  |
| I felt able to approach educators or the Nominated Supervisor with any concern |  |  |  |  |  |  |
| Indoor and outdoor environments are attractive and promote children’s imagination and creativity  |  |  |  |  |  |  |

Thank you for helping us reflect on and work at continually improving our practices. If you would like to make any further comments please do so below.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (optional) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Parent Questionnaire Orientation

INSERT LOGO and address

Dear Families

Feedback from families is a gift for the Service. It allows us to know what we’re doing right, what we’re doing wrong and what could be improved. Please answer this brief questionnaire about your child’s orientation below and place in the survey box near the sign in/out sheet by <insert date>

Overall how would you rate your child’s orientation to the service? (Please circle one)

Very Satisfied Satisfied Neither satisfied/dissatisfied Dissatisfied Very Dissatisfied

Please circle one

|  |  |  |  |
| --- | --- | --- | --- |
| yes | no | N/A | Did educators familiarise you and your child with the daily routine and activities? |
| yes | no | N/A | Did educators reassure you that most children settle in quickly to their new environment? |
| yes | no | N/A | Did the Nominated Supervisor arrange for you and your child to visit the service, meet the staff and become familiar with the environment before your child’s first day? |
| yes | no | N/A | If your child visited the service before their first day, did the educators indicate your child could participate in the activities if they wished? |
| yes | no | N/A | Were the daily timetable and curriculum discussed, as well as routines and any special requirements for your child?  |
| yes | no | N/A | Were you encouraged to send any special comfort items (teddy etc) to help your child in the initial settling in period? |
| yes | no | N/A | Were you invited to ring and check on your child at any time? |
| yes | no | N/A | Were you told what to bring? (eg birth certificate, immunisation record and Medicare number )  |
| yes | no | N/A | Did Educators explain modes of fee payment and communication (newsletters, pockets, communication box etc)? |
| yes | no | N/A | Did Educators explain the importance of labelling personal items and also shown the parent library where they can access the Service policies and other resources? |
| yes | no | N/A | Did educators discuss how best to tailor your child’s settling in period? |
| yes | no | N/A | Did educators encourage you to say goodbye when dropping off – and reassure you that if your child remains distressed over a period of time they will contact you?  |
| yes | no | N/A | Were you able to stay as long as needed to reassure your child?  |
| yes | no | N/A | Were you told you will be kept informed when you collect your child about how he or she is settling in and that you are welcome to discuss any issues with the nominated supervisor at a convenient time? |
| yes | no  | N/A | Was the Enrolment Form explained and filled in completely with all relevant information about your child? |

What could we improve?

What did we do well?

Name (optional)

Date\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_

Thank you for taking the time to complete this questionnaire.

# Parent Questionnaire Orientation OSHC

INSERT LOGO and address

Dear Families

Feedback from families is a gift for the Service. It allows us to know what we’re doing right, what we’re doing wrong and what could be improved. Please answer this brief questionnaire about your child’s orientation below and place in the survey box near the sign in/out sheet by <insert date>

Overall how would you rate your child’s orientation to the service? (Please circle one)

Very Satisfied Satisfied Neither satisfied/dissatisfied Dissatisfied Very Dissatisfied

Please circle one

|  |  |  |  |
| --- | --- | --- | --- |
| yes | no | N/A | Did educators familiarise you and your child with the daily routine and activities? |
| yes | no | N/A | Did educators reassure you that most children settle in quickly to their new environment? |
| yes | no | N/A | Did the Nominated Supervisor arrange for you and your child to visit the service, meet the staff and become familiar with the environment before your child’s first day? |
| yes | no | N/A | If your child visited the service before their first day, did the educators indicate your child could participate in the activities if they wished? |
| yes | no | N/A | Were the daily timetable and curriculum discussed, as well as routines and any special requirements for your child?  |
| yes | no | N/A | Were you invited to ring and check on your child at any time? |
| yes | no | N/A | Were you told what to bring? (eg birth certificate, immunisation record and Medicare number )  |
| yes | no | N/A | Did Educators explain modes of fee payment and communication (newsletters, pockets, communication box etc)? |
| yes | no | N/A | Did Educators explain the importance of labelling personal items and also shown the parent library where they can access the Service policies and other resources? |
| yes | no | N/A | Did educators encourage you to say goodbye when dropping off – and reassure you that if your child remains distressed over a period of time they will contact you?  |
| yes | no | N/A | Were you able to stay as long as needed to reassure your child?  |
| yes | no | N/A | Were you told you will be kept informed when you collect your child about how he or she is settling in and that you are welcome to discuss any issues with the nominated supervisor at a convenient time? |
| yes | no  | N/A | Was the Enrolment Form explained and filled in completely with all relevant information about your child? |

What could we improve?

What did we do well?

Name (optional)

Date\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_

Thank you for taking the time to complete this questionnaire.

# Parent Questionnaire Physical and Cultural Activities

INSERT LOGO and address

<Insert child’s name>

Dear families

We believe it is important to create a link between learning undertaken at our Service and activities your child participates in at home. Please answer the questions below and then place in the survey box in your child’s room so we can implement strategies to strengthen promote learning around your child’s interests and skills.

1. What kind of toys does your child play with at home?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. If your child participates in physical activity at home or at a club/organisation etc, please describe the activity (eg helping to wash the car, gardening, organised sport/gym).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. If your child participates in cultural activities please describe the activity (eg dancing, learning another language, playing a musical instrument).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

We would also like feedback on our physical play activities in the Service! As a parent or guardian, you know your child best. We would like your feedback on any activity or play experience your child came home excited about or bored with. This will help us improve our program and give your child the best possible educational environment.

1. Is there any piece of equipment that your child particularly likes? Yes/No

If yes, what is it? Do you know why they like it?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Is there any physical activity that your child particularly likes? Yes/No

If yes, what is it? Do you know why they like it?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Do you feel our program could be more culturally inclusive in regards to physical movement?

Yes/No

If yes, do you have any suggestions on how we could achieve this?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Would you be interested in coming in to the Service to talk about an activity or instruct a group of children in an activity?

Yes/No

Thank you for completing this questionnaire

# Parent Questionnaire Physical Activity OSHC

Our service promotes the [National Physical Activity Guidelines](http://www.health.gov.au/internet/main/publishing.nsf/content/health-pubhlth-strateg-phys-act-guidelines#rec_0_5http://www.health.gov.au/internet/main/publishing.nsf/content/health-pubhlth-strateg-phys-act-guidelines) (for more information go to the end of this document). As a parent or guardian, you know your child best. We would like your feedback about physical activity at home and about the physical activities at our Service that excite or bore your child. Your feedback will help us improve our program to give your children the best possible educational environment.

We also build our curriculum on our children’s interests, knowledge, family connections and cultural heritage. This allows you and your child to see that there is a connection between home and the service. Please answer the following questions so we can implement strategies into our curriculum that makes the link between home and Service life stronger.

1. Does your child participate in physical activity at home (includes formal sport activities/lessons as well as informal activities at home)?

[ ] Yes [ ] No

If yes, what sort of physical activity?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Is there any piece of equipment or activity that your child particularly likes?

[ ] Yes [ ] No (If no, skip to next question.)

What is it? Do you know why they like it?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Do you feel our physical movement activities could be more culturally inclusive?

[ ] Yes [ ] No

If yes, do you have any suggestions on how we could achieve this?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Does your child participate in any cultural activities (eg dancing or a musical instrument)? Please outline the activity below.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Would you be interested in coming in to the Centre to talk about this activity or instruct a group of children in this activity?

[ ] Yes [ ] No

1. Does your child have any interests or hobbies? Please outline these below.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The [National Physical Activity Guidelines](http://www.health.gov.au/internet/main/publishing.nsf/content/health-pubhlth-strateg-phys-act-guidelines#rec_0_5http://www.health.gov.au/internet/main/publishing.nsf/content/health-pubhlth-strateg-phys-act-guidelines) say that:

Children aged 5-12 years should engage in at least 60 minutes of physical activity a day. This does not have to be done all in one go.

# Parent Questionnaire Relationships

INSERT LOGO and address

Dear parents as a part of our continuous improvement plan for our service could you please take 5 minutes to complete this survey. Thank you for your time.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **1** **very good** | **2** **good** | **3 average** | **4** **poor** | **5** **very poor** |
| Do you feel welcomed, recognised, acknowledged and respected by all our educators? |  |  |  |  |  |
| Do you feel that your child is really known by, and really knows, the people who care for him or her? |  |  |  |  |  |
| Do you feel your child is not just looked after but really cared for? |  |  |  |  |  |
| Do you feel your child is happy, secure and engaged? |  |  |  |  |  |
| Are you and your child consistently received and greeted upon arrival? |  |  |  |  |  |
| Do you feel you are involved in making decisions about your child’s activities and learning? |  |  |  |  |  |
| Do you feel you are given lots of information about what is occurring? |  |  |  |  |  |

Further Comments

Thank you for taking the time to complete this survey. It can be placed in the survey box next to the sign in/out sheet.

# Parent Questionnaire Safety

INSERT LOGO and address

Dear Families

The safety of all children at the service is our first priority. We complete daily safety checks and regularly review the maintenance and safety requirements of our building and equipment. We welcome your views on our safety practices.

1. Do you think our building, equipment, furniture and resources are safe and pose no risks to children (or adults)?

yes no don’t know

1. If no please tell us how we could improve the safety of our building, equipment, furniture and resources

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Do you think our policies and procedures ensure children are kept safe at the service?

yes no don’t know

1. If no or unsure, please tell us how we could improve our policies and procedures or what you would like to see covered in them

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Do you think our practices ensure children are kept safe at the service?

yes no

1. If no, please tell us how we could improve our practices

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have any other comments or suggestions about safety at our service?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The following is optional

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Parent Questionnaire Safety, Hygiene and Maintenance

INSERT LOGO and address

Dear Families

We are committed to providing a safe and hygienic service. We value and respect your views and feedback, and ask that you take a few minutes to complete this survey.

Please circle the rating that best describes your response to the statement. You may also provide additional comments

1. **I feel confident that my child will always be safe at the service**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **I feel confident that the buildings, equipment and resources are cleaned in accordance with best practice guidelines**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **I would feel comfortable telling an educator or staff member about a safety hazard I may identify**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **The service is always tidy and uncluttered**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Hygiene practices at the service (eg nappy changing, hand washing, food storage and serving, sandpit) comply with best practice guidelines**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Broken equipment or resources are always removed immediately.**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **I am confident educators complete daily safety checks**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **I am aware the service implements a Building Maintenance procedure and records maintenance needs and actions taken**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **I am confident the service implements daily cleaning schedules**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

We welcome any comments you may have about safety, hygiene and maintenance issues.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Optional

Name: ­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you for taking the time to complete this survey. It can be placed in the survey box next to the sign in/out sheet.

# Parent Questionnaire Service Operations

INSERT LOGO and address

Dear Families,

We value your feedback on our practices, policies and activities, and welcome your contributions to service decisions. Do you have any comments or suggestions about:

1. the policy we are reviewing this week

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. the topic we are focusing on in our continuous improvement activities this week

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. the new information in our Quality Improvement Plan this week

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. our routines, activities or curriculum

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. any other issues

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. any way you can or would like to be involved in our routines, activities or curriculum

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The following is optional unless you answered question f)

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you for completing this questionnaire. Please return to the Nominated Supervisor or place in the box marked Questionnaires in the foyer.

# Parent Questionnaire Service Operations 2

INSERT LOGO and address

Dear Parent/Guardian

We aim to provide your child/ren with the highest level of care and education and we value your opinion about how well we are achieving this.

We have attached a short questionnaire and ask that you answer the questions as honestly as possible. Your responses will be kept private and confidential.

Please return completed survey by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you for your participation.

Kind regards,

<insert name of Nominated Supervisor>

Nominated Supervisor

<insert date>

Please tick relevant box

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Strongly Agree | Agree | Disagree | Don’t Know |
| 1. I feel welcome in the Service.
 |  |  |  |  |
| 1. The Service takes my concerns seriously.
 |  |  |  |  |
| 1. The Service provides helpful information.
 |  |  |  |  |
| 1. I feel as though I can talk to educators about my child’s progress.
 |  |  |  |  |
| 1. The Service values my help and interest.
 |  |  |  |  |
| 1. Teachers provide a challenging and stimulating environment for my child.
 |  |  |  |  |
| 1. Resources and equipment are engaging, well set up and visually attractive
 |  |  |  |  |
| 1. Teachers care if my child is not doing as well as he/she can.
 |  |  |  |  |
| 1. The Service is a safe and secure environment.
 |  |  |  |  |
| 1. The Service is always looking for ways to improve what it does.
 |  |  |  |  |
| 1. Educators regularly praise children.
 |  |  |  |  |
| 1. The children are the Service’s main focus.
 |  |  |  |  |
| 1. I share in the education of my child.
 |  |  |  |  |
| 1. I receive adequate notice of Service events.
 |  |  |  |  |
| 1. Communication from the Service is regular and informative eg newsletters, social media, email, SMS.
 |  |  |  |  |
| 1. Educators constantly aim to improve the quality of learning and teaching.
 |  |  |  |  |
| What do you see as the strengths of the Service? |
| How do you think the Service could be improved? |
| In what ways would you like to be more involved in the Service? |
| What other comments would you like to make (if any) |

Name (Optional)

Thank you for completing this questionnaire. Please return to the Nominated Supervisor or place in the box marked Questionnaires in the foyer.

# Parent Questionnaire Service Operations 3

INSERT LOGO and address

Dear Families

We are committed to educating and caring for children in partnership with parents. We value and respect your views and feedback, and ask that you take a few minutes to complete this survey.

Please circle the rating that best describes your response to the statement. You may also provide additional comments

1. **Educators interact warmly with my child**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Educators are responsive to my child’s needs and interests**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **The curriculum regularly includes activities and experiences that reflect my child’s strengths, knowledge and interests**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **The service is always clean and uncluttered**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Hygiene practices at the service (eg nappy changing, hand washing, food storage and serving, sandpit) comply with best practice guidelines**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **The outdoor environment is attractive and promotes children’s imagination, creativity and physical activity**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **My child’s learning is visible at the service (eg artwork, photos, curriculum displayed on walls)**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **I feel welcome when I visit the service**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Educators know and use my name**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Educators respect our family’s culture**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Educators often share information about my child’s daily activities and learning**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Educators encourage me to talk to them about my child, or to approach them with issues or concerns**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **There is information available about support services in the local or broader community (eg SIDS, health services, children’s health professionals, inclusion and support agencies)**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **There are opportunities to be involved in and provide feedback on service operations eg through information displays and information evenings**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **I feel welcome to share my skills and knowledge (work or hobby) with children and staff**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **My overall perception of the service is of a well run service that is committed to high quality education and care**

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

We welcome any comments you may have about our strengths or areas for improvement.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Optional

Name: ­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you for taking the time to complete this survey. It can be placed in the survey box next to the sign in/out sheet.

# Parent Questionnaire Service Operations 4

INSERT LOGO and address

Dear Families,

We value your feedback on our practices, policies and activities, and welcome your contributions to service decisions. We’d like to get your views on the way we communicate information about service operations. Please take a moment to answer this brief questionnaire.

1. Are you happy with **the way** you receive information about the operation of the service (eg by email, Facebook, newsletter)?

yes no

If no please tell us how we could improve the way we provide information about the operation of the service

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Are you happy with **how often** you receive information about the operation of the service?

yes no

If no please tell us how often you would like us to provide information about the operation of the service

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Do you think the information we display about service operations is easy to understand eg service philosophy and policy we’re reviewing?

yes no

If no please tell us how we could improve display of information

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have any comments or suggestions about the way we communicate information on service operations?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The following is optional

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Parent Questionnaire Toilet Training

INSERT LOGO and address

Dear Families

Please answer the following to enable educators to be in the best position to help your child through toilet training and ensure consistent practices between the service and home.

Childs Name: Child’s Room:

Your name: Date:

Approximately when did your child start toilet training?

During toilet training is your child wearing:

Nappies Yes/No Pull Ups Yes/No Underwear Yes/No

If your child needs help going to the toilet please describe help required eg pulling down pants, wiping bottom, getting on the toilet etc.

Please describe any specific toileting practices at home that aren’t covered above.

Please list any words your child uses to communicate their need to go to the toilet.

Are there any particular times of the day your child usually needs to go to the toilet?

Is there any other information you would like to provide?

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

 Parent Signature Parent Name Date

# Philosophy Review Letter

INSERT LOGO and address

Dear Parents and Carers,

As a part of our Quality Improvement Plan, we would like your feedback on our Philosophy.

At its simplest, a philosophy is important because it describes our values and goals, why we have these values and goals, and how we will achieve them.

Philosophy deals with questions arising from our capacity to affect others. The values we apply and our behaviours are not simply ‘natural’, they come to us through our capacity to reflect on our choices and to choose carefully how to act. This applies to businesses as much as to individuals.

With this in mind, we aim to foster a spirit of reflection on our philosophy to ensure it accurately reflects what we do and why we do it.

Please read our current philosophy and give your feedback, either directly to me or on the notice board with the existing philosophy.

Please be assured we value your input.

Kind regards,

<insert name of Nominated Supervisor>

Nominated Supervisor

Ph <insert number>

<insert date>

# Policy and Procedure Change Letter

INSERT LOGO and address

Dear Families

We regularly review our policies and procedures to ensure our practices comply with the early childhood laws and other laws where relevant, and reflect best practice principles and guidelines. On occasions we also update our policies and procedures to make them clearer and more user friendly.

We recently made the following changes to our <insert name of policy/procedure>

<insert changes>

These changes were made <insert reason for change>

I’ve attached a copy of the updated policy or procedure. Please don’t hesitate to contact me if you have any questions.

Kind regards,

<insert name of Nominated Supervisor>

Nominated Supervisor

<insert date>

# Policy and Procedure Feedback Letter

INSERT LOGO and address

Dear Families

We welcome feedback and suggestions from families on our policies and procedures at any time, including during our regular policy review process to ensure compliance with all relevant laws and best practice principles and guidelines.

You can provide feedback on our policies by completing the attached form, or by emailing your comments to me at <insert email address>.

Please don’t hesitate to contact me if you’d like to discuss our policies/procedures or your feedback further.

Kind regards,

<insert name of Nominated Supervisor>

Nominated Supervisor

<insert date>

# Preschool to School “Child Readiness Profile”

INSERT LOGO and address

Dear Parents

This profile has been developed by Early Childhood Educators and Teachers of Kindergarten school classes. You may wish to use this information as a guide to your child’s school readiness. Some schools also ask for information from Early Childhood Services about your child’s abilities, strengths and areas to focus on.

Please remember all children are unique and develop at their own pace. If you would like to discuss this information in more detail, please don’t hesitate to book an appointment through our office.

# Preschool to School

# “Child Readiness Profile”

Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Educator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Compiled: \_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Y** | **N** | **Comments** |
| **Physical Skills/Independence** |
| Shows a hand preference when completing activities |  |  |  |
| Uses scissors to cut along a straight line |  |  |  |
| Makes and designs things using a variety of materials |  |  |  |
| Enjoys a variety of indoor and outdoor play |  |  |  |
| Can do up buttons and zippers |  |  |  |
| Can put on and take off a jumper independently |  |  |  |
| Can put on and take off shoes independently |  |  |  |
| Can put on and take off a jumper independently |  |  |  |
| **Language** |
| Follows simple instructions |  |  |  |
| Uses at least 5 words in a sentence |  |  |  |
| Talks about the past, present and future |  |  |  |
| Recites words from songs, poems and rhymes |  |  |  |
| Joins in singing familiar songs |  |  |  |
| Answers and asks simple questions |  |  |  |
| Makes needs known |  |  |  |
| Speaks clearly and audibly, correctly articulating words |  |  |  |
| Interested in books etc for enjoyment |  |  |  |
| Identifies pictures in books, magazines, on television or video |  |  |  |
| Reads a book the right way up and turns one page at a time |  |  |  |
| Retells a story based on the pictures in a book, magazine, on television or video |  |  |  |
| Recognises name in print |  |  |  |
| Recognises and names some letters |  |  |  |
| Talks to others about familiar objects and events |  |  |  |
| Uses an adult like pencil grip |  |  |  |
| Writes own name |  |  |  |
| Can draw a person with 5 body parts |  |  |  |
| Draws pictures to represent an event |  |  |  |
| Uses a variety of tools (eg pens, textas, paintbrushes) to draw, scribble or write |  |  |  |
| **Personal/Social Skills** |
| Uses the toilet independently and can wipe bottom |  |  |  |
| Washes hands independently |  |  |  |
| Can say own name and address |  |  |  |
| Identifies colours including green, red, blue and yellow |  |  |  |
| Plays cooperatively with others and takes turns in a game |  |  |  |
| Can focus on an activity or listen quietly to a story for a few minutes |  |  |  |
| Can share an adult’s attention with several other children |  |  |  |
| Finishes a task and tidies up afterwards |  |  |  |
| Recognises own belongings |  |  |  |
| Adapts to new settings and experiences |  |  |  |
| Is curious about the world |  |  |  |
| Participates in imaginative play |  |  |  |
| **Mathematics** |
| Sees differences in shapes |  |  |  |
| Names squares, rectangles, triangles, circles |  |  |  |
| Uses numbers to count |  |  |  |
| Uses words ‘many, a lot, more, less’ |  |  |  |
| Identifies things in a group that are different |  |  |  |
| Recognises opposites eg up and down, under and over, in front and behind, day and night |  |  |  |
| Recognises patterns |  |  |  |
| Can copy a square, rectangle, circle and triangle |  |  |  |

Five strengths the child has

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Five of the child’s favourite things

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Three areas to strengthen

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other suggestions or comments to assist the child’s transition to school

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Educator’s Name Nominated Supervisor’s Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Educator’s Signature Nominated Supervisor’s Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Date

# Re-enrolment Information Update Letter

INSERT LOGO and address

Dear families,

To ensure we provide a safe environment which promotes the health and wellbeing of your child, please update your information below if relevant eg you have moved, have a new phone number or email address, have changed jobs, changed health funds, or wish to appoint new emergency contacts etc.

There is no need to complete the form if information has not changed. You need only complete relevant sections.

Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Home address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Suburb \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PARENT DETAILS**

 **Parent One**  **Parent Two**

Where answer is same as Parent One write same

Surname \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Given Names \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Best contact number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MEDICAL INFORMATION**

Medicare Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Do you have ambulance cover? € Yes € No

Private Health Fund € Yes € No Fund name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fund Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Doctor’s Name Doctor’s phone number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Doctor’s address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Optional) Dentist’s Name (Optional) Dentist’s phone number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Optional) Dentist’s address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**IMMUNISATIONS**

Are your child’s immunisations up to date? € Yes € No

\* If your child has had an immunisation since your last advice, please provide a copy of your child’s Australian Childhood Immunisation Records (ACIR) Statement. (You can get a copy by calling 1800 653 809, by email on acir@medicareaustralia.gov.au , from a Medicare or Centrelink office or online at [www.medicareaustralia.gov.au/online](http://www.medicareaustralia.gov.au/online) ).

**AUTHORISATIONS AND EMERGENCY CONTACTS**

Name of any contact who is no longer authorised to collect child from service or consent to medical treatment, administration of medication etc.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of new person who may collect your child from the service. If your child needs to be collected because they are unwell, we will contact this person if we cannot contact you or you are unable to collect your child. This person must therefore live a maximum of 30 minutes from the service and must provide identification when collecting the child. Please obtain their consent before listing them as an emergency contact.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home phone Work phone Mobile

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I authorise this person to collect my child from your service € Yes € No

**Parent One**

Can we notify this person of any emergency involving your child € Yes € No

 if we cannot immediately contact you?

Can this person consent to medical treatment or the administration € Yes € No

 of medication if we cannot contact you?

Can this person consent to the Nominated Supervisor or an educator € Yes € No

taking the child outside the service if we cannot contact you?

Parent One Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent Two**

I authorise this person to collect my child from your service € Yes € No

Can we notify this person of any emergency involving your child € Yes € No

 if we cannot immediately contact you?

Can this person consent to medical treatment or the administration € Yes € No

 of medication if we cannot contact you?

Can this person consent to the Nominated Supervisor or an educator € Yes € No

taking the child outside the service if we cannot contact you?

Parent Two Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COURT ORDERS**

Are there any court orders, parenting orders or parenting plans covering the powers, duties, responsibilities or authorities of any person in relation to the child or access to the child?

€ Yes (please attach) € No

**OTHER**

Is there any else you would like to tell us?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent One Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Two Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Privacy Notice**

Personal information will be managed openly and transparently in a way that protects an individual’s privacy and respects their rights under Australian privacy laws.

We only collect or use personal information if this is needed to education and care to children at the service, or to comply with our legal obligations. We will take reasonable steps to make sure you know we have your personal information, how we got it and how we'll handle it.

We collect most personal information directly from a parent or guardian. We may also collect information through our website, social media page, Family Law court orders or agreements, special needs agencies and training courses. We may occasionally request information from other organisations which you would reasonably agree is necessary for us to educate and care for a child.

The information collected includes information required under the National Education and Care Law and Regulations or needed to promote learning under the Early Years Learning Framework. This includes name, address, date of birth, gender, family contact details, emergency contact details, authorised nominee details, parents’ occupations, cultural background, home language, religious beliefs, payment details, child care benefit information, Medicare number, , immunisation records, medical information and medical management plans, photos of children and information about children’s strengths, interests, preferences and needs, including special needs.

We do not disclose personal information to others unless you would reasonably expect us to do this, we have your consent or we are complying with an Australian law.

We aim to keep the personal information we hold accurate, up-to-date and complete. This enables us to provide high quality education and care while ensuring the health and safety of children, and it is also important that we can contact you in the event of an emergency.

We have systems and practices in place to ensure personal information is secure and can only be accessed by those who need the information or may legally access it.

You have the right to access your personal information. There are some circumstances under Australian privacy laws where we may not be able to give you access. We will tell you if this is the case. There is generally no cost for accessing your information. We will tell you if there is a charge before providing access.

Our Privacy Officer for privacy matters, including complaints, is the Approved Provider or Nominated Supervisor who may be contacted by telephone on INSERT PHONE NUMBER or email INSERT EMAIL ADDRESS or by mail INSERT POSTAL ADDRESS.

We will provide a copy of any updates to our Privacy and Confidentiality Policy on our Service Noticeboard and include the changes in our Newsletter.

# Re-enrolment Letter

INSERT LOGO and address

Name

Address Line 1

Address line 2

Dear <insert name>

It is with pleasure we ask you to confirm your intention to re-enrol <insert child’s name> in <insert year>.

We trust you and your child are enjoying the fun, inspiring and nurturing learning environment that we offer at <insert service name>, and look forward to being a part of your child’s ongoing care and education next year.

If your child will **not** be returning next year please tick this box.

If your child will only be returning for the period before they

start school please tick this box.

To secure your place please confirm the sessions/days that you would like <insert child’s name> to attend by ticking the days below and returning to the office when next at the centre. Please return by <insert day, date and year <insert day, date and year> to ensure you have the best chance of getting your preferred care option.

You may need to adjust table below if you offer part day sessions

**Preference 1**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Monday | Tuesday | Wednesday | Thursday | Friday |
|  |  |  |  |  |

**Preference 2**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Monday | Tuesday | Wednesday | Thursday | Friday |
|  |  |  |  |  |

If your child is likely to go to school in <insert following year> please tick this box.

If you wish to re-enrol another child/children, please advise child/children’s name/s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please note fees for re-enrolled children are payable from the date we re-open the service in <insert year>

ie <insert date>.

If you wish to enrol a new child/children, please provide the details below:

Child’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB: \_\_\_\_\_\_\_\_\_\_\_\_

Year child likely to start school: \_\_\_\_\_\_\_\_\_\_

**Preference 1**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Monday | Tuesday | Wednesday | Thursday | Friday |
|  |  |  |  |  |

**Preference 2**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Monday | Tuesday | Wednesday | Thursday | Friday |
|  |  |  |  |  |

Child’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB: \_\_\_\_\_\_\_\_\_\_\_\_

Year child likely to start school: \_\_\_\_\_\_\_\_\_\_

**Preference 1**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Monday | Tuesday | Wednesday | Thursday | Friday |
|  |  |  |  |  |

**Preference 2**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Monday | Tuesday | Wednesday | Thursday | Friday |
|  |  |  |  |  |

As always, please don’t hesitate to contact me if you have any questions or comments.

Kind Regards

<insert Nominated Supervisor’s Name>

Nominated Supervisor

<insert phone number>

<insert email>

<insert date>

# Re-enrolment Letter (2)

INSERT LOGO and address

**IMPORTANT: WILL YOUR CHILD BE ATTENDING OUR SERVICE/CENTRE NEXT YEAR?**

Dear Families

We are currently planning our enrolments for <insert year>. Is your child returning to the centre next year?

**To secure your position for <insert year> it is essential that you complete and return this form otherwise we will assume that you do not need a place at our service next year.**

We also need to know your preferred days for the coming year so we can do our best to meet your needs.

**Please complete this form and return it to the office no later than** <insert date>. After this date we will offer any vacant spaces for the coming year to families outside the centre.

You will receive confirmation of your allocated days by <insert date>. Please contact me if you would like to discuss your child’s needs next year.

Kind Regards

<insert Nominated Supervisor’s Name>

Nominated Supervisor

<insert phone number>

<insert email>

<insert date>

**ENROLMENT INFORMATION**

Child’s Name …………………………………………............................... Date of birth ……………………..

1. Does your child require a place at our service next year? Please circle Yes No
2. If your child is starting school in <insert year> does your child require care in January prior to commencing school? ………………. If yes please indicate last date of care ………………..........

There are no further questions if your child is not returning, and you do not need a place for another child. If your child IS returning, or you need a place for another child, please continue:

1. Child’s age as at 1st January <insert year> …………..…years ……………………months
2. Which days in <insert year> do you require? (Please circle all days required)

Monday Tuesday Wednesday Thursday Friday

1. Do you have another child/children requiring care at the centre in <insert year>? Please circle Yes No
2. Child’s age as at 1st January <insert year> …………..…years ……………………months
3. Which days in <insert year> do you require? (Please circle all days required)

Monday Tuesday Wednesday Thursday Friday

1. Child’s age as at 1st January <insert year> …………..…years ……………………months
2. Which days in <insert year> do you require? (Please circle all days required)

Monday Tuesday Wednesday Thursday Friday

**Parent’s signature ……………………………………………...........................................................**

**Preferred contact number ………………………………………………………………….….........................**

# Re-enrolment Confirmation Letter

INSERT LOGO and address

Name

Address Line 1

Address line 2

Dear <insert name>

It is with pleasure to write to confirm <insert child’s name> re-enrolment for next year on the following days:

You may need to adjust table below if you offer part day sessions

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Monday | Tuesday | Wednesday | Thursday | Friday |
|  |  |  |  |  |

Please note re-enrolment commences on <insert date> when we re-open after the Christmas break.

<Insert child’s name> will be in the <insert room/group name> with <insert Room/Group Leader’s name> and educators <insert names>.

We are looking forward to sharing a stimulating, educational, loving and fun environment with your child, and to working in partnership with you and your family.

Please feel free to contact me if you would like to discuss any issue.

Kind Regards

<insert Nominated Supervisor’s Name>

Nominated Supervisor

<insert phone number>

<insert email>

<insert date>

# Safety Letter

INSERT LOGO and address

Dear families and caregivers,

We take our obligations to ensure the safety and wellbeing of every child and adult at our Service very seriously. One way we do this is by identifying potential hazards and then implementing measures to eliminate or reduce the risk to acceptable levels.

The following measures are some of those responses to potential risks and we ask all family members who visit our Service to comply with them at all times:

* bring any other children you have with you at drop off/pick up times into the Service. Please do not leave them in the car where temperatures can quickly become too hot for children, or children could endanger themselves by pressing buttons/changing gears etc
* shut the gate firmly behind you so it’s closed, locked shut and unable to be opened by a child
* sign your child in and out
* dress your child in sun safe clothing that complies with our sun protection policy
* hand all medication to an educator and never leave it in your child’s bag where it can be accessed by children
* keep your child at home if they’re unwell so the illness cannot spread to other children and adults
* never take your child into the kitchen or leave them alone in a room
* never bring any food or substance into the Service if we have advised that food or substance triggers allergies or anaphylaxis in a child at the Service. Please also check the ingredients of products like nappy creams
* advise us as soon as possible about changes in your child’s health needs or medications
* advise us immediately if there is a new parenting/court order involving your child
* advise us as soon as possible if you see something at the Service you feel poses a risk to children’s or adults’ safety ie unsafe work practices or damaged premises or equipment.

Please also inform us as quickly as possible if you change any of your phone numbers, mailing or email addresses or your emergency contacts so we can contact you or your authorised contact in an emergency.

Sincerely,

<insert name of Nominated Supervisor>

Nominated Supervisor

Ph <insert number>

<insert date

# Safety Letter OSHC

INSERT LOGO and address

Dear families and caregivers,

We take our obligations to ensure the safety and wellbeing of every child and adult at our Service very seriously. One way we do this is by identifying potential hazards and then implementing measures to eliminate or reduce the risk to acceptable levels.

The following measures are some of those responses to potential risks and we ask all family members who visit our Service to comply with them at all times:

* bring any other children you have with you at drop off/pick up times into the Service. Please do not leave them in the car where temperatures can quickly become too hot for children, or children could endanger themselves by pressing buttons/changing gears etc
* shut the gate firmly behind you so it’s closed
* sign your child in and out
* dress your child in sun safe clothing that complies with our sun protection policy
* hand all medication to an educator and never leave it in your child’s bag where it can be accessed by children
* keep your child at home if they’re unwell so the illness cannot spread to other children and adults
* never bring any food or substance into the Service if we have advised that food or substance triggers allergies or anaphylaxis in a child at the Service
* advise us as soon as possible about changes in your child’s health needs or medications
* advise us immediately if there is a new parenting/court order involving your child
* advise us as soon as possible if you see something at the Service you feel poses a risk to children’s or adults’ safety ie unsafe work practices or damaged premises or equipment.

Please also inform us as quickly as possible if you change any of your phone numbers, mailing or email addresses or your emergency contacts so we can contact you or your authorised contact in an emergency.

Sincerely,

<insert name of Nominated Supervisor>

Nominated Supervisor

Ph <insert number>

<insert date

# Service Changes Letter

INSERT LOGO and address

Dear families,

As you may already be aware our Service < has undergone/is undergoing> some changes. We have outlined these below together with the reasons we <have made/are making> them.

* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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We welcome your feedback. If you’d like to talk about these changes, please don’t hesitate to speak with educators or the Nominated Supervisor.

Sincerely

<insert Nominated Supervisor’s Name>

Nominated Supervisor

<insert phone number>

<insert email>

<insert date>

# Sleep Letter

INSERT LOGO and address

Name

Address Line 1

Address line 2

Dear Families and Carers

Our room routines include periods of sleep and rest. The number and length of these periods is based on the average developmental needs of children in the particular room.

As outlined in our Sleep, Rest, Relaxation and Clothing Policy, educators have a legal obligation to ensure children are offered sleep or rest when they need it. However, educators also try to maintain children’s home routines whenever possible, and are mindful of any wishes families express in relation to their child’s sleep or rest patterns. In some cases educators may discuss the implementation of a sleep transition plan with families.

To help educators understand your child’s particular needs for sleep or rest, please answer the following questions:

Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is your child sleeping in at home? cradle/cot bed

How many sleeps a day (not including 1 2 3 or more

night sleep) does your child have?

How long does your child sleep for? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child have a comforter/dummy yes no

to help go to sleep?

If yes please provide details \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please describe any particular signs/habits

which your child displays when tired \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please feel free to discuss your child’s sleep or rest needs at any time with educators. You’re also welcome to make an appointment with an educator or me if you’d like to discuss any concerns in more detail.

Kind regards,

<insert name of Nominated Supervisor>

Nominated Supervisor

<insert date>

# Staff Changes Letter

INSERT LOGO and address

Dear families,

As you may have heard already heard < insert staff member’s name> is leaving our Service. <Insert reason if appropriate eg She is moving to ...to begin the next chapter of her life and we wish her well although we’ll be sorry to see her leave>

Please be assured we will work with you and your child to make sure there is a smooth transition with minimal disruption to your child’s wellbeing and learning. We will for example:

* explain to the children that the staff member is leaving and why if this is appropriate
* offer extra comfort and support to children who are upset by the staff member’s departure
* create opportunities for children who had close relationships with this staff member to forge stronger relationships with other staff members/educators.

If you would like to discuss this further, please do not hesitate to speak with educators or the Nominated Supervisor.

Kind Regards

<insert Nominated Supervisor’s Name>

Nominated Supervisor

<insert phone number>

<insert email>

<insert date>

# Transition to New Room Letter

INSERT LOGO and address

Dear families,

I’m writing in relation to your child’s impending move to a new room with different educators <next year/in the coming weeks>. It’s natural to have concerns about how well your child will settle into a new environment. While change is harder for some children than others, I want to reassure you that we have strategies in place to help you and your child feel comfortable as soon as possible. These include:

* inviting the new educator to visit your child in their room as often as possible and talking about them in general conversations
* talking with your child about the coming change for at least 2 weeks before the move in a positive way
* visiting the new room and educators to complete activities for a couple of weeks before the move. Families are welcome to attend
* talking to families about the strategies they use to help their child cope with change
* celebrating your child’s last day in the room with a special menu and/or activity.

Please remember that the opportunity to move between <groups/rooms> at our Service is based on many factors, not just age.

If you have any questions or concerns about your child’s move, please don’t hesitate to contact your child’s educators or the Nominated Supervisor.

Sincerely,

<insert name of Nominated Supervisor>

Nominated Supervisor

Ph <insert number>

<insert date>

# Transition to School Letter

INSERT LOGO and address

Dear families,

I’m writing in relation to your child staring school next year. It’s natural to have concerns about how well your child will settle into the school environment. While change is harder for some children than others, I want to reassure you that we have strategies in place to help. These include:

* talking with your child about school in a positive way eg the similarities and differences, opportunities to make new friends
* visiting the local school towards the end of the year to familiarise children with the school environment
* providing a school readiness report in October before your child starts school
* completing school readiness activities in the lead up to the end of the year eg children bring lunch from home and open it by themselves.

Many parents ask how they can help their child get ready for school. Some simple ideas include making sure your child can wipe their bottom, take off their jumper, put it back on the right way, pack it in their bag, do up their shoes, unwrap their sandwich and undo their lunchbox.

If you have any questions or concerns about your child starting school, or need more information on local schools and their requirements, please don’t hesitate to contact your child’s educators or the Nominated Supervisor.

Sincerely,

<insert name of Nominated Supervisor>

Nominated Supervisor

Ph <insert number>

<insert date>

# Transition to School Letter (2)

INSERT LOGO and address

Name

Address Line 1

Address line 2

Dear Families and Carers

The preschool room will be beginning transition to school activities in the coming weeks / is continuing transition to school activities to ensure your child has all the skills and knowledge needed for the best possible start to school. To help educators tailor the program to your child’s needs, please provide the following information:

Is your child going to school in 2019? Yes No

If yes please continue.

Which school is your child attending? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has your child visited this school? Yes No

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is your child participating in a school transition to school program? Yes No

Comments:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you been speaking with your child about school? Yes No

Comments:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please tell us more about your child’s excitement/concerns etc about starting school.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Educators will be talking with you regularly about your child’s progress. If you have any questions about your child’s readiness for school, please feel free to raise these with educators or to make an appointment to discuss in more detail.

Kind regards,

<insert name of Nominated Supervisor>

Nominated Supervisor

<insert date>