

Planning, observing and documenting individual children's learning

.....'s **summary and planning sheet**

Age (months)

Date

Characteristics of effective learning (CEL)

Personal, social and emotional development (PSED)

Voice of the child

Communication and language (CL)

Physical development (PD)

Literacy

Mathematics

Understanding the world (UW)

Expressive arts and design (EAD)

Please tick

- | | | | |
|--|--------------------------|---|--------------------------|
| Completed as part of settling in process | <input type="checkbox"/> | Completed as part of the regular review process | <input type="checkbox"/> |
| Completed as part of progress check at age two | <input type="checkbox"/> | Completed as part of transition process | <input type="checkbox"/> |

Future provision and support

.....would like to learn:

CEL

PSED

CL

PD

Literacy

Mathematics

UW

EAD

Key person

Signature.....

Print name.....

Date.....

Manager/ supervisor/ SENCO

Signature.....

Print name.....

Date.....

I have signed the setting's interagency consent form and I am aware that the information above could be shared by the setting, with prior consent, to support my child.

Parent(s) signature..... Print name..... Date.....