



BRONTE PUBLIC SCHOOL

Hewlett Street
BRONTE NSW 2024
Tel: 9389 4527
Fax: 9369 3001
ABN: 79 608 892 845
bronte-p.school@det.nsw.edu.au

*Please attach a recent photo
to help us recognise our new
students.
Family photos are perfect!*

Kindergarten Student Information

The information provided will help us to ensure a smooth transition to school for your child. Please call or email the school if you have any questions or would like to discuss the information further.

Forms can be returned as a hard copy or emailed directly to bronte-p.school@det.nsw.edu.au

Student's name: _____ DOB: ____/____/____

Does your child have a different preferred name? _____

Parent's name/s: _____

Please nominate the people who will be collecting your child from school in the afternoon:

Does your child speak a language other than English? Y/N _____

Pre-school attended: _____ No. of Years _____

Please name any friends or family members who currently attend Bronte or who will be beginning Kindergarten at Bronte with your child next year: _____

What do you believe are your child's strengths? _____

Does your child have any special interests or skills? _____

Are there any aspects of your child's development you would like us to be aware of? _____

Please turn over.

Please add any relevant information that you consider to be of value and guidance to our teachers in regard to support from outside agencies – e.g. speech therapists, occupational therapists etc.

How would you like to be involved in your child's education?

Is there any other information that you would like to add?

Thank you for taking the time to complete this information.

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