# TRANSITION LEARNING AND DEVELOPMENT STATEMENT

## Section 1: Child and Service Details

This section to be completed by the Early Childhood Educator

*There are resources available on the Department of Education’s website to support schools to effectively use the Transition Statement at www.vic.gov.au/transition-learning-and-development-statements*

### CHILD’s DETAILS

|  |  |
| --- | --- |
| Child’s first name: |  |
| Child’s surname: |  |
| Child’s date of birth: | Click or tap to enter a date. |
| Primary school where the child is enrolled (if known): |  |
| Outside school hours care service (if known): |  |

### CHILD’s PHOTO

[insert photo]

### PARENT/GUARDIAN CONTACT DETAILS

|  |  |
| --- | --- |
| Name/s: |  |
| Relationship to child: |  |
| Phone: |  |
| Email: |  |

### EARLY CHILDHOOD SERVICE CONTACT DETAILS

|  |  |
| --- | --- |
| Name of service: |  |
| Address of service: |  |
| Service approval number: |  |
| Name of educator/s completing this form: |  |
| Position of educator/s completing this form: |  |
| Qualification of educator/s completing this form: |  |
| Phone: |  |
| Email: |  |

|  |  |
| --- | --- |
| **Date this form was completed** (mandatory)**:** | Click or tap to enter a date. |

### CONTEXT OF EARLY YEARS SETTING/S

Please provide a brief description of the learning environment. This should cover: the name and type of each relevant early childhood setting, a description of program delivery (e.g. five-hour sessions, three times a week), total number of children in group, information about staffing changes or the child's participation that may have impacted continuity of learning.

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### SPECIFIC INFORMATION

Please provide an overview of any information that may impact on this child's continuity of learning. For example, any significant health concerns/allergies; language/s spoken at home; any significant family circumstances or changes to family circumstances; specific positive learning relationships, any disclosed/diagnosed disability and/or developmental delay (noting that additional information can be provided in Section 1.2), any overall comments etc.

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The Transition Learning and Development Statement includes:

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|  | **Section 1: Child and Service Details** *(mandatory)* summary of child and family contact information including service context and specific information about the child and family that may impact on the child’s continuity of learning. |
|  | **Section 1.1: Outcomes and Teaching Strategies** *(mandatory)* summary by an early childhood educator of the child’s abilities in each of the Victorian Early Years Learning and Development Framework (VEYLDF) learning and development outcomes and the Victorian Curriculum F-2 (as appropriate) and intentional teaching strategies to support the child’s learning and development. |
|  | **Section 1.2: Enhanced Transitions** *(where applicable)*information to support a child with a disability or developmental delay who requires enhanced transition. |
|  | **Section 2: The child –** completed with the child. |
|  | **Section 3: The family –** completed by the family. |
|  | **Section 4: Sharing the Transition Learning and Development Statement** *(mandatory)* |

## Section 1.1: Outcomes and Teaching Strategies

The Transition Learning and Development Statement should support the child's continuity of learning as they transition into school by recognising the child's skills, capabilities and learning dispositions and linking these to the Learning and Development Outcomes of the Victorian Early Years Learning and Development Framework (VEYLDF). It should also identify specific intentional teaching strategies for the receiving teacher to note and plan for.

If your service is using the Early Years Assessment and Learning Tool (the Tool) and you have completed a learning report for this child, intentional teaching strategies that were generated in the report can be copied/pasted in the Intentional Teaching Strategies column below. For further information about using information from the Tool to complete the TLDS, see the [Department’s website](https://www.vic.gov.au/early-years-assessment-and-learning-tool).

This section is to be completed by the early childhood educator.

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| **LEARNING AND DEVELOPMENT OUTCOMES**  Provide a description of the child’s learning and development progress against the five outcomes of the VEYLDF and Victorian Curriculum F-2 (as appropriate). Select at least *one* *descriptor* under *each* outcome that best describes the child’s learning progress. Once selected, edit descriptors to suit individual children. | **INTENTIONAL TEACHING AND LEARNING STRATEGIES FOR CONTINUITY OF LEARNING AND DEVELOPMENT**  Briefly identify any intentional teaching strategies that may support the child's continuity of learning as they start school. A minimum of one intentional teaching strategy is required per outcome. This should be individualised noting the child’s abilities, dispositions and interests. |
| IDENTITY – Children have a strong sense of identity   * *Select from* ***Attachment - engagement*** * *Select from* ***Attachment - relationships*** * *Select from* ***Attachment - communication*** * *Select from* ***Culture - identity*** * *Select from* ***Emotions - expression*** * *Select from* ***Emotions - coping mechanism*** * *Select from* ***Persistence - resilience***   Add any further comments here | Add one or more intentional teaching strategies here |

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| COMMUNITY – Children are connected with and contribute to their world   * *Select from* ***Belonging - relationships*** * *Select from* ***Belonging - inclusion*** * *Select from* ***Diversity & respect*** * *Select from* ***Fairness - compassion*** * *Select from* ***Fairness - identity*** * *Select from* ***Socially responsible - environment***   Add any further comments here | Add one or more intentional teaching strategies here |

|  |  |
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| WELLBEING – Children have a strong sense of wellbeing   * *Select from* ***Emotional - accessible*** * *Select from* ***Emotional - satisfaction*** * *Select from* ***Emotional - cooperation*** * *Select from* ***Emotional - self-regulation*** * *Select from* ***Health - communication*** * *Select from* ***Health - spatial awareness*** * *Select from* ***Health - fine motor skills*** * *Select from* ***Health - awareness*** * *Select from* ***Health - personal hygiene*** * *Select from* ***Health - gross motor skills***   Add any further comments here | Add one or more intentional teaching strategies here |

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| LEARNING – Children are confident and involved learners   * *Select from* ***Learning - curiosity*** * *Select from* ***Learning - initiation*** * *Select from* ***Learning - engagement*** * *Select from* ***Learning - meta cognition*** * *Select from* ***Learning - design*** * *Select from* ***Problem solving - application*** * *Select from* ***Problem solving - classification*** * *Select from* ***Problem solving - repetition*** * *Select from* ***Problem solving - memory*** * *Select from* ***Problem solving - numeracy*** * *Select from* ***Problem solving - comparisons*** * *Select from* ***Problem solving - geometry*** * *Select from* ***Problem solving - predictions*** * *Select from* ***Transfer - learning*** * *Select from* ***Transfer - adapt strategies*** * *Select from* ***Transfer - tools for technology*** * *Select from* ***Transfer - creativity***   Add any further comments here | Add one or more intentional teaching strategies here |

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| COMMUNICATION – Children are effective communicators   * *Select from* ***Communication - reciprocal*** * *Select from* ***Communication - creativity*** * *Select from* ***Communication - confidence*** * *Select from* ***Communication - engagement*** * *Select from* ***Text meaning - sounds & patterns*** * *Select from* ***Text meaning - visual*** * *Select from* ***Text meaning - emotions*** * *Select from* ***Expression - imagination*** * *Select from* ***Expression - creativity*** * *Select from* ***Expression - syntax (sentence structure)*** * *Select from* ***Expression - morphology (words) & phonology (speech sounds)*** * *Select from* ***Symbols - drawing & writing*** * *Select from* ***Symbols - meaning*** * *Select from* ***Symbols - connections*** * *Select from* ***Technology***   Add any further comments here | Add one or more intentional teaching strategies here |

## Section 1.2: Enhanced transitions for children with a disability or developmental delay (where applicable)

It is recommended that this section only be completed for a child with a disability and/or developmental delay. This section is to be completed by the early childhood educator (where applicable).

If this section is not relevant for this child, please leave it blank or do not include it in the final printed version.

|  |  |  |  |
| --- | --- | --- | --- |
| **Details of key worker or transition support coordinator (where available)** | | | |
| Key worker: |  | | |
| Position: |  | | |
| Phone: |  | | |
| Email: |  | | |
|  |  | | |
| **Early childhood professional services details and reports**  (e.g. diagnosing psychologist/medical report, speech pathologist, occupational therapist, preschool field officer, early childhood intervention, psychologist, physiotherapist, audiologist, social worker or other support service) | | | |
| Name of service: |  | | |
| Address: |  | | |
| Contact Person: |  | | |
| Position: |  | | |
| Phone: |  | | |
| Email: |  | | |
| Report available: | Yes | No |  |
| Name of service: |  | | |
| Address: |  | | |
| Contact Person: |  | | |
| Position: |  | | |
| Phone: |  | | |
| Email: |  | | |
| Report available: | Yes | No |  |

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### ADDITIONAL INFORMATION TO SUPPORT THE CHILD’S INCLUSION AT SCHOOL

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| **Areas of note** | **Strategies for enhanced support** |
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### OTHER SUPPORTS AVAILABLE

List of reports or plans that are relevant and useful to support the child’s transition and inclusion at school (for example, Behavioural support plan, Adaptive skill assessment; Hearing test etc.).

|  |  |  |  |
| --- | --- | --- | --- |
| **Report name** | **Date of report** | **Will the report be sent to the school?** | |
|  | Click or tap to enter a date. | Yes | No |
|  | Click or tap to enter a date. | Yes | No |
|  | Click or tap to enter a date. | Yes | No |

### EARLY ABLES REPORTS

The Early ABLES reports provide useful information for completing Section 1.1 of the Statement. Copies of the learning reports may also be provided to the school with permission from the child's parent/guardian.

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| --- | --- | --- | --- |
| Report completed: | Yes | No |  |
| Date of report (1): | Click or tap to enter a date. | | |
| Date of report (2) | Click or tap to enter a date. | | |

**Section 2: The child**

*To maximise the use of this resource Early Childhood educators and /or families assisting the child to complete this section should ensure the child feels comfortable and is not rushed or pressured into completing this section. If the child resists try again later or opt out of this section.*

This section should be completed with the child by an adult they know and feel comfortable with. It should reflect the child’s feelings and perspectives (a child may elect to draw, write or offer responses to the prompts below).

|  |  |
| --- | --- |
| Name of the person assisting the child to complete this section: |  |
| Relationship to the child: |  |

|  |  |
| --- | --- |
| At home and/or Kindergarten/Child care my favourite thing is: |  |
| I think I am really good at: |  |
| Sometimes I might need help to: |  |
| Things that I am curious about: |  |
| I think school will be: |  |

**Child’s drawing** (or upload drawing)**:**

**Section 3: The family**

*To help families complete this section please provide families with the ‘Guidelines to help families complete the Transition Learning and Development Statement’ (available in a range of languages).*

*Some families may benefit from an educator taking time to help fill in this section.*

*Families can talk to their child’s early childhood educator about how they can assist them to complete this section or refer to the information in the ‘Guidelines to help families complete the Transition Learning and Development Statement’ (a copy is available from their early childhood educator)****.***

This section is to be completed by the child’s Parent/Guardian. Sections 1 and 1.1 must accompany this section when providing it to the family for them to complete, along with Sections 1.2 and 2, if completed.

It is important for families to contribute their perspectives to their child’s Transition Learning and Development Statement.

|  |  |  |  |
| --- | --- | --- | --- |
| Name of person filling in this form: |  | | |
| Relationship to the child: |  | | |
| What is your preferred language? |  | | |
| Is your child Aboriginal and or Torres Strait Islander? | Yes | No |  |
| Does your child have any siblings or close relatives/kin attending the same primary school? | Yes | No |  |
| If yes, please list their name/s and current grade level/s: |  | | |

As the child’s first and most enduring teacher, a family’s contributions are valued and support the relationship you will develop with your child’s school. Please take some time to respond to **some or all** of the questions below.

|  |  |
| --- | --- |
| What are your hopes, wishes or goals for your child at school? (Prompts: making friends; being happy; learning to read; write; etc.) |  |
| What would you like to know about school? (Prompts: what to bring on the first day? Teacher’s name?) |  |
| How do you think your child will settle into school? How can we help? |  |
| Currently my child is interested in… |  |
| Overall, I believe my child responds and learns best when… |  |
| Is there anything else you would like your child’s new teacher to know about your child? |  |

**Section 4: Sharing the Transition Learning and Development Statement**

*The Transition Learning and Development Statement summarises your child’s learning before they begin school and provides specific strategies for school teachers and Outside School Hours Care (OSHC) educators to support their continuity of learning in the school and OSHC setting.*

*Please read the ‘Guidelines to help families complete the Transition Learning and Development Statement’ for more information about the Transition Statement; how to fill in your part of the Transition Statement and what happens to the Transition Statement once it has been completed.*

*The section for the family (section 3), although optional, is very useful for the school, so we encourage all families to complete this section.*

Please read the information your child’s early childhood educator has provided in Section 1, 1.1 and 1.2 (where applicable). The information that the early childhood educator has written about your child is a professional evaluation of your child’s learning and development, however, if you have any concerns please discuss these with the educator. This information will be retained by the early childhood service, school and Outside School Hours Care (OSHC) service (where applicable) in accordance with Victorian privacy laws.

Your child’s early childhood service will compile the various sections of this Transition Statement upon receiving your input and provide you with a copy.

Your child’s early childhood service will share relevant information to support your child’s transition with your child’s school (and if applicable, the OSHC service).

If you choose not to provide input, your child’s early childhood educator will share the completed sections with your child’s school (and if applicable, the OSHC service).

If you have concerns about having the Transition Statement shared with your child’s school or OSHC service (where applicable) to support your child’s transition, please speak to your child’s early childhood educator. Research indicates sharing this information supports a successful transition to school.

|  |  |  |  |
| --- | --- | --- | --- |
| *The information below is to be completed by the early childhood educator* | | | |
| Name of the educator: |  | | |
| I have provided the family with a completed copy of their child’s Transition Learning and Development Statement | | Yes | No |
| The family is aware that the service will share the Transition Statement with their child’s school and Outside School Hours Care (OSHC) service to support their child’s transition | | Yes |  |
| The family did **not** complete and return *Section 3 – The family* | | Yes |  |
| The family has opted out of sharing the Transition Learning and Development Statement with their child’s school or OSHC service (where applicable). | | Yes |  |
| Date: | Click or tap to enter a date. | | |
| *Please note: Early childhood educators must consider their professional ethics when communicating with the child’s school and OSHC service and only share information relevant to supporting a child’s transition.* | | | |