My Own Mark

Drawing/writing by me

My Story

My name:

Date:

Information about me

Full name:	
Contact address:	
Date of birth:	Other relevant numbers:
NHS/NI number:	
My nursery/school/college/workplace is:	
Contact name and number for where	l attend:

Contacts - professionals

Full name	
Professional role	
Telephone or mobile	
Email	
Date of first contact	
Full name	
Professional role	
elephone or mobile	
Email	
Date of first contact	
Full name	
Professional role	
elephone or mobile	
Email	
Date of first contact	

Contacts - professionals

Full name	
Professional role	
Telephone or mobile	
Email	
Date of first contact	
Full name	
Professional role	
Telephone or mobile	
Email	
Date of first contact	
Full name	
Professional role	
Telephone or mobile	
Email	
Date of first contact	

Information about me

Parent or carer's name/s (indicate parental responsibility):
Siblings (with ages):
Telephone number:
Email:
Language used at home:
How I communicate best with others:
The best place and times for me and my family to meet up with everyone are:

More about me

	Things my
Useful background information about me	90,

How my parents/carers feel parents/carers would like for the future:

How my parents/carers feel

How my parents/carers feel	IMORE ADOUT ME Important people in my life
This is what is important to my parents/carers right now:	
This is what my parents/carers would like to help me with:	

More about me Important people in my life	

What people say about me

What poople day about me	
This is what my parents/carers say about me:	
This is what my key person says about me:	
This is whatsays about me:	

How best to support me

The best way to help me right now:
Things I'd like to be able to do soon:
Tillings I'd like to be able to do sooil.

How best to support me
The things that are working well for me:
The things I sometimes struggle with:

What people say about me

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This is what	says about me:
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