

MY JOURNEY



CHILD'S NAME: _____

DATE OF BIRTH: _____

NAME AND ADDRESS OF THE CHILD CARE CENTRE ATTENDED: _____

CONTACT INFORMATION: (NAME, ADDRESS, PHONE NUMBER, EMAIL)
OF THE SCHOOL THE CHILD WILL BE ATTENDING: _____

NAME AND ADDRESS OF THE SCHOOL THE CHILD WILL BE ATTENDING: _____

DATE: _____

My Journey is an initiative that was put in place in 2008 by the partners of the Haut-Saint-Laurent's Comité d'Action Local to ensure a positive school transition. In 2011, the Beauharnois-Salaberry Comité d'Action Local Petite Enfance joined forces with the goal of implementing the tool for both of the targeted territories, and thus grouping together the two school boards who are touched by these two early childhood forums.

Since 2011, this supportive action has been maintained by both consultations. In 2014, Haut-Saint-Laurent partners merged their early childhood centres, la Table de concertation en petite enfance and the Comité d'Action Local du Haut-Saint-Laurent to become the Réseau 0-5 Haut-Saint-Laurent. In 2015, Beauharnois Salaberry's partners merged their early childhood centres, the Table de Concertation Intersectorielle en Périnatalité and the Comité d'Action Local Petite enfance sur le territoire Beauharnois-Salaberry to become the Table d'Actions Concertées 0-5.

MY JOURNEY

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Revised Edition (March 2011) : Partners of the Comité d'Action Local Petite enfance Beauharnois-Salaberry, France Marion (Garderie Porculus), Lucie Riendeau (CLSC Valleyfield), Stéphanie Amesse (Commission Scolaire de la Vallée-des-Tisserands), Micheline Séguin and Lysanne Denicourt (Collège de Valleyfield), Brigitte Asselin (Vie en forme), Peggy G. Morrissette (CPE Citronnelle), Marie-Eve Groulx (Comité d'Action Local Petite enfance Beauharnois-Salaberry).

Updated (September 2017) : Partners of the Réseau 0-5 Haut-Saint-Laurent et de la Table d'Actions Concertées 0-5 Beauharnois-Salaberry involved : Claudine Paquette (Centre de Ressources Familiales du Haut-Saint-Laurent), Sonia Gariépy (CPE Abracadabra), Julie Beaudin (CISSSMO-CLSC of Huntingdon), Diane Donnely (New Frontiers School Board), Guillaume-Paul Limoges and Sophie Masse (Réseau 0-5 HSL), Mylène Lapierre (Garderie Les Petits Bricoleurs), Lucie Riendeau (CISSSMO-CLSC of Salaberry-de-Valleyfield), Manon Brisson and Brigitte Harton (Équipe Petits Dragons, Commission Scolaire de la Vallée-des-Tisserands), Andréane Gélneau and Marie-Eve Groulx (TAC 0-5).

Project Coordinators:

- Since 2008 : Sophie Masse
- Since 2010 : Marie-Eve Groulx

Graphic Designer: duval design communication

In this document, the masculine form designates both women and men.

The sole purpose of the use of the masculine is to lighten the reading of the document.

GOAL OF THIS DOCUMENT

This document allows agencies and schools to exchange information about a child's development, and will aid in a smooth transition from early childhood centres to the school environment.

ADVANTAGES

- **Allows a better understanding of the child.**
- **Facilitates the inclusion of appropriate support and strategies at school.**
- **Provides insight into the classroom dynamics to help the teacher plan accordingly.**
- **Helps those involved from different networks to more easily discern what strategies have already been put in place and also facilitates follow-ups in the case of children with specific challenges.**
- **Avoids the need for parents to continuously repeat the same information about their child.**
- **Recognizes the expertise of those working in early childhood environments.**

INSTRUCTIONS

Each centre is responsible, in partnership with the parents, for the way in which information is shared with the school. This document may be used for any situation in which the child is experiencing a transition. It is important to create a plan that facilitates the child's progress throughout the transitional period.

CONFIDENTIALITY

The confidentiality of the documents received by the school and by all other centres will be assured by the appropriate administrators.

HOW TO PROCEED

MARCH

- Complete the document *My Journey* for students entering Kindergarten according to their needs in the early childhood centre.
- The administrators of each centre/school concerned are responsible for ensuring a follow-up with teachers and early childhood educators.

** Responding to observable elements*

1. Complete the observation form in *My Journey*.
2. Have parents sign section 6 (Parental Authorization).
3. Provide parents with a copy of the booklet *My Journey*.
4. The person who completes the booklet, *My Journey*, is responsible to return it to the centre's administration so that the booklet may then be sent to the proper school by April 30th of each year. The administrators of the early childhood centre must send the document *My Journey* to the coordinator's office so that it can then be transmitted to the school's administrator within the prescribed time frame.

BEGINNING OF MAY

Each school administrator will review the document *My Journey* and provide the information to all teachers concerned at the appropriate time.

In order to respond better to the needs of the child, a follow-up telephone call or meeting with the parents, school personnel, and the person who completed the form may take place.



EXCHANGE OF INFORMATION WITH REGARDS TO SCHOOL ATTENDANCE:

SECTION 1

Personal information

CHILD	
LAST NAME:	FIRST NAME:
CHILD'S MOTHER TONGUE:	DATE OF BIRTH:
PARENTS OR GUARDIANS	
LAST NAME:	FIRST NAME:
HOME ADDRESS:	
PHONE NUMBER AT HOME: ()	PHONE NUMBER AT WORK: ()
LAST NAME:	FIRST NAME:
HOME ADDRESS:	
PHONE NUMBER AT HOME: ()	PHONE NUMBER AT WORK: ()

Family history

HOME ENVIRONMENT	
I live with:	Dad <input type="checkbox"/> Mom <input type="checkbox"/> Mom and Dad <input type="checkbox"/> Shared Guardianship <input type="checkbox"/>
Other <input type="checkbox"/>	_____
I HAVE (NUMBER)	I LIVE WITH THEM <input type="checkbox"/>
Sisters :	Brothers :
Half-sister(s) :	Half-brother(s) :

ADDITIONAL INFORMATION:

SECTION 2

History of attendance

STARTING DATE AT THE CENTRE (Y/M/D)	NUMBERS OF DAYS / WEEK	NUMBER OF HOURS / DAY	ANTICIPATED DATE OF DEPARTURE (Y/M/D)

1. HOW MANY CHILDREN ARE IN THE GROUP? _____

2. DOES THE CHILD NEED AN ATTENDANT IN ORDER TO FUNCTION IN THE GROUP?

YES ☐

NO ☐

NAME OF THE CHILD CARE CENTRE:

NAME OF PERSON MAKING REFERRAL (EDUCATOR OR ATTENDANT):

TELEPHONE:

E-MAIL:

SECTION 3

History of Services

NAME OF THE INSTITUTION	DATE (Y/M/D)	NAME OF THE PROFESSIONNAL / FUNCTION	TYPE OF SERVICE / DIAGNOSIS / EVALUATION IN PROGRESS	CHECK IF A REPORT AND/OR IEP ARE ATTACHED

ADDITIONAL INFORMATION:

SECTION 4

Global development skills

The objectives of early childhood learning activities emphasize the global development of skills and processes. The child's global development is constructed in a progressive manner throughout his/her life experiences as well as through activities in which he/she takes part.

The following tables describe some behaviours which may be observed in the child.

LÉGENDE



It's easy
for me!



Even with help,
I cannot do it.



I can do it
with help.



Not observed

SOCIAL AND MORAL SKILLS



1. I wait for my turn.				
2. I follow instructions.				
3. I participate in group activities.				
4. I am able to interact with adults.				
5. I am able to interact with peers.				
6. I am aware of the feelings of others.				
7. I am able to find solutions to conflicts.				
8. I try to console or comfort a peer.				
9. I am able to recognize a problem.				
10. I am able to resolve problems.				

CHALLENGES

SUCCESSFUL STRATEGIES

ADDITIONAL INFORMATION :

COGNITIVE AND LANGUAGE SKILLS



1. I understand concepts of time (morning, noon, night, yesterday, tomorrow, today, days of the week, months, seasons).				
2. I speak in full sentences using articles (e.g. a, it, and, he, etc.).				
3. I can retell stories and events in sequence.				
4. I recognize and can name six body parts.				
5. I count objects.				
6. I know and can name three geometric shapes.				
7. I know my first and last names.				
8. I can put things in order of size (from smallest to largest).				
9. I understand simple directions.				
10. I can understand multi-step instructions.				
11. I can complete puzzles of more than 20 pieces.				
12. I understand spatial concepts (e.g. on, under, in front of, behind, etc.).				
13. I can sing songs with rhythm.				
14. I use the pronoun "I".				
15. I look for and experiment with solutions when I have a problem.				

CHALLENGES

SUCCESSFUL STRATEGIES

ADDITIONAL INFORMATION :

MOTOR SKILLS



1. I hold my pencil with a three-finger grip.				
2. I can cut simple shapes.				
3. I am able to draw a person.				
4. I can thread objects.				
5. I go up and down stairs alternating feet.				
6. I can climb by myself (e.g. on playground equipment).				
7. I can run.				
8. I can jump forward with my feet together.				
9. I can balance on one foot for five seconds.				
10. I build things with blocks.				
11. I am able to catch a ball with two hands.				
12. I can go to the bathroom by myself.				
13. I can fasten my clothes.				

CHALLENGES

SUCCESSFUL STRATEGIES

ADDITIONAL INFORMATION :



AFFECTIVE SKILLS



1. I understand and can express various emotions such as joy, sadness, anger, and surprise.				
2. I can calm myself when I'm in a conflict.				
3. I take initiative.				
4. I make choices.				
5. I can identify my friends.				
6. I can leave my dad and mom.				
7. I persevere with tasks.				
8. I accept refusals.				
9. I adapt to routines and transitions.				
10. I can accept complements.				
11. I can adapt to change.				

CHALLENGES

SUCCESSFUL STRATEGIES



ADDITIONAL INFORMATION:

SECTION 5

To better understand the child
(The positive aspects)

Add any other information or comments on adjustments, adaptations and/or challenges with regard to the integration of the child in the centre. ou may attach any documents, drawings or work that you believe will add to the understanding of the child and facilitate his/her transition. (Documents and drawings will not be returned.)



EDUCATOR OR ATTENDANT

PARENT(S) OR GUARDIAN(S)



SECTION 6

Parental Authorization

- Yes ☐

No ☐

I authorize the child care centre to send the information included in this document to the administration and/or teacher of my child.
- Yes ☐

No ☐

I authorize the child care centre to send the evaluation reports and/or the Individualized Education Plan (IEP) mentioned in section 3 to the administration and/or teacher of my child.
- Yes ☐

No ☐

I authorize follow-up telephone calls or meetings between the school personnel and the person who completed the document.
- Yes ☐

No ☐

I authorize my child's home caregiver to send the My Journey tool to the coordinating office to which he is affiliated.

Signature of parent or guardian

Date (Y/M/D)

Signature of the person who completed the document

Date (Y/M/D)

Signature of the person in charge of the centre

Date (Y/M/D)



Project revised in 2017 by The Réseau 0-5 Haut-Saint-Laurent and the Table d'Actions Concertées 0-5 Beauharnois-Salaberry



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