

PARENT QUESTIONNAIRE

(Please complete and return to the school office as soon as possible)

	Strongly Agree	Agree	Disagree	Strongly Disagree
My child enjoys school				
The schools keeps my child safe				
The school informs me about my child's progress				
My child is making enough progress at this school				
The teaching is good at this school				
The school helps me to support my child's learning				
The school helps my child to have a healthy lifestyle				
The school makes sure that my child is well prepared for the future (for example changing year group or changing school)				
The school meets my child's particular needs				
The school deals effectively with unacceptable behaviour				
The school takes account of my suggestions and concerns				
The school is led and managed effectively				
Overall, I am happy with my child's experience at this school				

Additional Comments:

OPTIONAL

If you would like us to get back to you quickly about any of the comments you have made, please complete the section below. However, if you prefer, you may remain anonymous.

Signature: _____ Date: _____

Your Child's Name _____ Child's Class: _____