

ANNUAL SCHOOL PARENTS' QUESTIONNAIRE 2014

This questionnaire is being sent to all parents with children at the school. Please fill it in so that we can have your views of the school. We have re-designed the form to give you more opportunity to comment further after each question if you would like to. We are very grateful for your cooperation in this exercise.

If you have more than one child at the school, please fill in a separate questionnaire for each as your views on some things may differ from child to child.

Please give the year group of the child to which these views refer:

Year

For each of the statements below, please tick the box which best reflects your views of the school.

	Strongly Agree	Tend to Agree	Don't Know	Tend to Disagree	Strongly Disagree
1. My child likes school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. My child is making good progress in school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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3. Behaviour in the school is good	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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4. My child gets the right amount of work to do at home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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5. The teaching is good	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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	Strongly Agree	Tend to Agree	Don't Know	Tend to Disagree	Strongly Disagree
6. I am kept well informed about how my child is getting on	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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7. I would feel comfortable about approaching the school with questions or a problem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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8. The school expects my child to work hard and achieve his or her best	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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9. The school works closely with parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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10. The school is well led and managed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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11. The Governing Body is effective.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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12. The school is helping my child become mature and responsible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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13. The school provides an interesting range of activities outside lessons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Thank you for taking the time to fill in this questionnaire. Please return it in the sealed envelope provided to your son/daughter's tutor or to the School Office.

Signature of parent (optional)

Date