Questionnaire for Parents/Carers Highlees Primary School



Please take the time to let us know your views about our school by completing this questionnaire. Completion of the questionnaire is voluntary.

Please provide only one answer to each question, using a tick in the relevant box. **If you are unable to answer a question, please leave it blank.** You do not need to include your name on the form. We will use the questionnaires to identify any significant needs and issues raised by you and hopefully be able to address them.

We appreciate you taking the time to complete this and helping us to make improvements where needed.

My child is in (please circle)

Foundation Year 1 Stage	Year 2	Year 3	Year 4	Year 5	Year 6
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(Optional) Name / Parent of

	(please tick)	Strongly agree	Agree	Disagree	Strongly disagree
1	My child is happy at this school.				
2	My child feels safe at this school.				
3	My child makes good progress at this school.				
4	My child is well looked after at this school.				
5	My child is taught well at this school.				
6	My child receives appropriate homework for their age.				
7	The school ensures the pupils are well behaved.				
8	The school deals effectively with bullying.				
9	This school is well led and managed.				
10	The school responds well to any concern I raise.				
11	I receive valuable information from the school about my child's progress.				
12	I would recommend this school to another parent.				
13	If you wish to explain any of your answers, or a details here.	dd any further	comments abo	ut the school, pl	ease give