

### Parent Voice

Name \_\_\_\_\_ (Optional. Needs to be completed if you would like us to answer any questions or discuss any issues raised further.)

Questions	Yes	No	Don't know	Any extra comment
My child feels happy at school				
My child feels safe at St Clements C of E Academy				
The school makes sure pupils are well behaved				
The school supports parents				
The school support the emotional wellbeing of pupils.				
My child does well at St Clements C of E Academy				
The school support my child's wider development (Interests, opportunities, trips)				

Suggestions, comments, what you want us to know.....