**CATHOLIC LIFE AND RELIGIOUS EDUCATION**

# PARENTS AND CARERS QUESTIONNAIRE

|  |
| --- |
| **School:** |

For each of the statements below, please tick the box which best reflects your views in relation to

the school

My child/ren is/are in year/s \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  Please tick | **Strongly****Agree** | **Agree** | **Disagree** | **Strongly****Disagree** | **Don’t****Know** |
| 1 | My child enjoys being at this Catholic school  |  |  |  |  |  |
| 2 | I am happy with the values and attitudes that the school teaches |  |  |  |  |  |
| 3 | I am made to feel welcome in the school |  |  |  |  |  |
| 4 | The school seeks the views of parents/carers and takes account of their suggestions and concerns |  |  |  |  |  |
| 5 | The school gives me a clear understanding of what is taught in Religious Education |  |  |  |  |  |
| 6 | The school enables my child/ren to enjoy and achieve a good standard of work in Religious Education |  |  |  |  |  |
| 7 | The school keeps me well informed about my child(ren)’s progress in Religious Education |  |  |  |  |  |

***If you wish to make a comment on any of the above areas please write on the back of this questionnaire. Please do not refer to individual members of staff by name.***

Parent’s/Carer’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Thank you for taking the time to fill in this questionnaire.**