

Student Questionnaire

Name: _____

	Please tick, with 1 being that you agree 5 being that you disagree	1 ☺	2	3 ☺	4	5 ☹
1	I enjoy school.					
2	My School helps me to be healthy.					
3	I feel safe when I am at school.					
4	I learn a lot in lessons.					
5	Behaviour is good at my school.					
6	Adults care about me.					
7	Teachers are interested in my views.					
8	I know how well I am doing at school					
9	Adults explain to me how to improve my work.					
10	My school helps me to prepare for the future.					
11	The Principal and Vice Principals in my College do a good job.					

12	What do you like doing at school?	
13	What would help you learn better?	
14	What is the most exciting lesson or activity you have done?	
15	If an inspector came in what would you tell them?	
16	Additional comments:	