



SEND Parent  
Consultation Form



1. Do you feel your child and their needs are well supported?  
Yes / No

Please give details if you wish to:

2. Do you understand how well your child is progressing ?  
Yes / No

Please give details if you wish to:

3. Is your child happy in school?  
Yes / No

Please give details if you wish to:

Please turn over.....

4. Do you feel part of reviewing your child's progress alongside staff?  
Yes / No

Please give details if you wish to:

5. Are your views as parents listened to?  
Yes / No

Please give details if you wish to:

6. Is there anything you would like to add that would help the school improve its policy or its service to parents of children with SEND, including SEND information accessed via the school's website?  
Yes / No

Please give details if you wish to: