

**Year 5 Secondary Information Event**

**SEND Survey**

1. **How would you rate your experience of our “Year 5 Secondary Information Event’?**

 Very Dissatisfied

 Dissatisfied

 Neutral

 Satisfied

 Very Satisfied

1. **Did this event help you and your family in understanding the Phase Transfer Process?**

Yes No

1. **Do you feel better informed about the schools that are available in your local community and what they are able to provide?**

Yes No

1. **Giving us constructive feedback. Is there anything you could suggest that we could do differently to improve this event?**

1. **If you are happy to be contacted to discuss your responses further please provide your contact details below, otherwise the survey will remain anonymous.**

**Name**

**Number**

 **Email**