## Year 7 Settling In Parents' Review Meeting Parent Response

Name of Son:	Form	
Marrie of Son:		

(low) 1 2 3 4 5 (high)
Under 1h / 1hr / 1h 30/over 1h 30
(low) 1 2 3 4 5 (high)
(low) 1 2 3 4 5 (high)
(low) 1 2 3 4 5 (high)
(low) 1 2 3 4 5 (high)

Thank you for taking the time to complete this questionnaire. Please ask your son to return it to the school office in the envelope provided by **Thursday 11 October.** We look forward to meeting you at the review meeting.