**PARENTAL RESPONSE SHEET – Term 1 September 2019**

Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Class: \_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  Parent’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| In relation to **learning**, what are the things that are important to you and your child when at school? |
| What are the things you would like your child to achieve this session?  |
| When your child has a good day at school, what makes it good? |
| As a parent, how do you feel home and school can best work together to ensure the best outcomes for your child? |

 |
|  |
|  |
|  |