



**Win a free session of your choice in our exciting holiday club**

## S C Kids survey for parents/carers

Sharmans Cross has been offering childcare on the school site since 2006 (Swallows and more recently S C Kids). In order to plan the next steps in our on-going development of the before and after school club, and holiday clubs, as well as our programme of activities, we would like to find out about your experiences so far (what is going well/less well etc).

Please complete this questionnaire and return it to Club, or email it to the Manager Lyn Hoban ([s45lhoban@sharmans-cross.solihull.sch.uk](mailto:s45lhoban@sharmans-cross.solihull.sch.uk)) by 24th March 2014. If you have more than one child at the club please complete only one form.

### About you

Your name: .....

How many of your children are using childcare provision at S C Kids?

1       2       3       4

Which elements of the childcare provision are your children currently attending?

Breakfast club     After-school club     Holiday club

### Your views

#### How would you describe S C Kids? (Tick all that apply.)

- |                                     |   |
|-------------------------------------|---|
| <input type="checkbox"/> Safe       | <input type="checkbox"/> Good quality                 |
| <input type="checkbox"/> Flexible   | <input type="checkbox"/> Welcoming                    |
| <input type="checkbox"/> Affordable | <input type="checkbox"/> Other (please specify) ..... |

#### 1 How would you describe the staff? (Tick all that apply.)

- Professional/highly trained
- Friendly to the children
- Good at communicating with parents
- Other (please specify) .....



**2** How would you describe the activities provided at the clubs? (Tick all that apply.)

- |  |   |
|--|---|
| <input type="checkbox"/> Varied          | <input type="checkbox"/> Fun and enjoyable            |
| <input type="checkbox"/> Age appropriate | <input type="checkbox"/> Other (please specify) ..... |
| <input type="checkbox"/> Challenging     |   |

**3** How do you like to be contacted by S C Kids? (Tick all that apply.)

- |  |   |
|--|---|
| <input type="checkbox"/> Email/text          | <input type="checkbox"/> Letter                       |
| <input type="checkbox"/> Posters/noticeboard | <input type="checkbox"/> Face-to-face meetings        |
| <input type="checkbox"/> Website             | <input type="checkbox"/> Other (please specify) ..... |

**4** How has **your child** benefitted from attending S C Kids (Tick all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> Developed their confidence | <input type="checkbox"/> Made new friends             |
| <input type="checkbox"/> Learned new skills         | <input type="checkbox"/> Other (please specify) ..... |

**5** What do you like the most about S C Kids?

**6** How can we improve the services we offer families at S C Kids; are there other sessions you would like to see offered?

**Thank you for taking the time to complete this form!**

