

Keeping Safe Pupil Voice Booklet







Name:		
Year:	Class:	



- A member of staff will help you to read each part and write your response if you prefer.
- Please circle one response for each question.
- There is space for you to add more information after each question.

1.	Do you feel safe in school?
	Yes No
	Please add more about feeling safe in school if:
2.	Do you feel safe at break time and lunch times?
	Yes No
	Please add more about feeling safe at break time and lunch time:

3. Are there any places or times in school that you
do not feel safe?
Yes No
Please add more about not feeling safe in school
4. Is there someone in school you can talk to if
4. Is there someone in school you can talk to if you are worried about anything?
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you are worried about anything? Yes No
you are worried about anything? Yes No Please add more about who you talk to in school
you are worried about anything? Yes No
you are worried about anything? Yes No Please add more about who you talk to in school
you are worried about anything? Yes No Please add more about who you talk to in school
you are worried about anything? Yes No Please add more about who you talk to in school
you are worried about anything? Yes No Please add more about who you talk to in school
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5. Do you feel listened to by staff in school? Yes No

staff in scho	ore about being listened to by ool:
. Do you feel s o	afe from bullying in school? Yes No
Please add mo	ore about feeling safe from

7	Do you know what to do if you or another pupil
	were being bullied?
	Yes No
	Please add more about what to if you or
	another pupil were being bullied.
8	Do you know how to keep safe online?
	Yes No
	Please give at least one example of what you do/
	would do to keep safe online

9. Do you know what to do if you saw/ heard or read something you did not like about you or another pupil online?

Yes No

3	one example of what you heard or read something
you did not like online	e.



10. Do you know what the PANTS rule is?

Yes No

	you answered Yes please explain it in your own rds
11.	Do you know who your safe adults are? Yes No
	you answered Yes please name the safe adults u know.

12.	Do you know who else or where else to go to
	for help?
	Yes No
	you answered Yes please say who or where e you could go for help.
13.	Do you have any other ideas about how to make North High School a safer place?
 	
	

Thank you for taking the time to complete this.

