**School Questionnaire Survey Form**

### **General Information**

* **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **School Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

### **Teacher Performance**

1. **How effective is the teaching staff?**
	* **Very Effective**
	* **Somewhat Effective**
	* **Needs Improvement**
2. **Do teachers provide enough support for students?**
	* **Yes**
	* **No**
	* **Sometimes**
3. **How often do teachers give feedback on assignments?**
	* **Always**
	* **Sometimes**
	* **Rarely**

### **Infrastructure & Services**

1. **How would you rate the school’s learning resources?**
	* **Excellent**
	* **Good**
	* **Poor**
2. **Are school meals healthy and nutritious?**
	* **Yes**
	* **No**
	* **Needs Improvement**
3. **Is the school library well-stocked?**
	* **Yes**
	* **No**
	* **Needs More Books**

### **Suggestions**

* **What suggestions do you have for improving the school? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**