

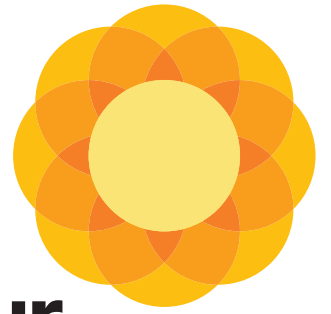
Tell us about  
you and what  
you would like  
to happen

Have your  
**say**



4 TO 7-YEAR-OLDS





# Have your say

## 4 TO 7-YEAR-OLDS YOUR REVIEW

**This is YOUR review. It is about YOU  
being involved in what is going on in  
YOUR life**

**COMPLETE DETAILS BELOW:**

.....  
Your name *(if you want to say)*:  
.....

.....  
Date of review:  
.....

.....  
Your Independent Reviewing Officer (IRO):  
.....  
.....

Your Independent Reviewing Officer (IRO) is sure that your carer or another adult you know will help you complete this. The IRO will use the information to make sure your views are at the centre of your review and they will make a copy, but after the review you can keep this form.



# Nursery and school

1. **What is your school like?** *(Please tick)*



I don't like it



It's okay



I like it

2. **Do you have friends at school?** *(Please tick)*



I don't have any



I have some



I have lots



# Where you live

3. Do you like where you live? *(Please tick)*



I don't like it



It's okay



I like it

4. Do you feel safe where you live? *(Please tick)*



Not really



Sort of



Yes





# What you like to do

5. What are your favourite things to do?

.....

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.....

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6. Do you do any activities? *(Please tick)*



No



Yes



# Seeing your family (or contact)

7. Do you see your family? *(Please tick)*



No



Yes

8. How do you feel when you see your family? *(Please tick)*



I don't like it



It's okay



I like it

9. Is there anybody else you would like to see?

.....

.....

.....

.....

.....



**BIRMINGHAM  
CHILDREN'S TRUST**