

# School Policy Audit - Student Form

Name of Policy: .....

Auditors Names: .....

Place a tick in the appropriate column

Statement	Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
I know where to find my school's policy					
I have read my school policy					
I understand my school's policy					
If asked by a sibling or friend I would be able to explain the policy to them					
I know how to make a complaint under the policy					
I understand how my complaint would be handled					
I know who to complain to and where to go if I needed support					
I feel that if I made a complaint it would be dealt with fairly					
I feel safe knowing these policies exist					
I feel that my school is a safe school for students					

Other Comments: .....

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