



Parent/Carer Voice
Computing and Online Safety



Computing Leader



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Your Child's name

What is your child's Year?

Is your child: male? or female?

Computing

Do you feel you understand what topics/skills your child learns in Computing?

Yes No

How useful do you find the school website for locating information about Computing?
(5 being most useful)

1 2 3 4 5

How useful do you find the school website for locating information about online safety?
(5 being most useful)

1 2 3 4 5

Does the school keep you up to date with information and news about Computing and Online Safety?

No Somewhat Yes

Are you aware of the subscription services the school has purchased which your child has access to?

No Somewhat Yes

Does your child share any learning/work with you at home from Computing lessons?

No Somewhat Yes

How important would you say Computing as a subject for your child is? (5 being most important)

1 2 3 4 5

Online Safety

Does your child have online access outside of school?

Yes No

Are you aware of what your child does online?

No Somewhat Yes

Does your child have or have access to a smartphone/tablet?

Yes No

Are you aware of what your child accesses on the smartphone/tablet including all the apps?

No Somewhat Yes

Are you confident you are in control of your child's online access outside of school?

No Somewhat Yes

Do you have any monitoring, parental settings and systems in place to protect your child?

Not at all Partially Yes

Can you confidently apply privacy and security settings, and understand them for apps and sites?

Not at all Partially Yes

Are there any online safety rules you have set with your child?

Yes No

Have you spoken about the dangers online?

Yes No

Are you aware of what to do if an online incident occurs, including who to contact?

No Somewhat Yes

Does your child access games/apps and websites which are recommended for older children?

Yes No

Would you attend an Online Safety workshop at school?

Yes Evening Yes Day No