



Consultation Response Form

Your details

Name: _____

Address: _____

Email Address: _____

Date: _____

I am a: *(tick all boxes that apply)*

Parent/carer or pupil of Cippenham Infant School

Parent/carer or pupil of Cippenham Primary School

Staff member of Cippenham Infant School

Staff member of Cippenham Primary School

Community member

Other stakeholder

Please be assured that we will not pass any personal information on to any other organisation and your responses will be kept confidential.

Please use this space to make us aware of your observations, suggestions and comments. Please feel free to write overleaf or use extra pages as required:

Having read the consultation document do you feel that the reasons for the merger are clear?

Yes

No

Comments -

In your opinion, how else can Cippenham Infant School and Cippenham Primary School support the people associated with the academy during this consultation process?



Consultation responses must be returned prior to Friday 19 April 2019

Please return responses to the school office at Cippenham Infant School or
Cippenham Primary School or return them by post to:

Company Secretary, Cippenham Infant School, Dennis Way, Slough, SL1 5JP

