

**LEARNING & SCHOOL EFFECTIVENESS SERVICE**

**CURRICULUM DIRECTORY**

**REVIEW OF SUPPORT**

School \_\_\_\_\_

School contact person \_\_\_\_\_

Support provided by \_\_\_\_\_

Term(s):     **Autumn 2004 / Spring 2005 / Summer 2005** (please circle as appropriate)

<b>1. Quality of support provided</b> <i>(Where possible, please rate the quality of support you received under the following headings using a 1-5 scale – 1=very good, 2=good, 3=satisfactory, 4=poor, 5=very poor)</i>					
	1	2	3	4	5
<b>Punctuality</b>					
Providers subject knowledge					
Interpersonal skills of provider					
Relevance and usefulness of support work					
Appropriate style of delivery/working					
Use of practical ideas/exemplars					
Please comment					

**2. Impact of the support received**

*How well did the support work impact on the expertise and/or confidence of the staff?  
(1=very good, 2=good, 3=satisfactory, 4=poor, 5=very poor) \_\_\_\_\_*

**Please comment, where relevant, on the impact of individual staff, departments, key stage or whole school**

**3. Next Steps**

*As a result of receiving this support, what are your next steps in developing learning and teaching further?*

**Please comment**

**Will you be requesting further support from this provider? YES/ NO**  
(please delete as appropriate)

Signed \_\_\_\_\_  
(Secondary Schools)

**HOD/Co-ordinator/Strategy Manager**

Signed \_\_\_\_\_  
(primary and Secondary Schools)

**Headteacher**

Please fax this form on (01454 868967) to Sue Morgan, Curriculum Directory Manager, South Gloucestershire Education Service.