

PUPIL Questionnaire



Please do not write your name on this questionnaire.

In some questions you can circle the answer, in others we would like to know what you think.

Thank you for taking the time to complete this questionnaire. Your feedback is very important to our school.

1. Do you enjoy PE class? Yes/No/Sometimes

2. Which is your favourite PE activity? Athletics/Dance/Games/Gymnastics/
Swimming/Outdoor and Adventure

3. Do you enjoy PE homework? Yes/No/Sometimes/
We don't receive PE homework

4. How could we make PE better in our school? Comment

5. Did you enjoy taking part in the *Run a Day* challenge? Yes/No
Comment

6. Did you enjoy the *Active Break Every Day* challenge? Yes/No
Comment

7. Do you enjoy classroom-based physical activity breaks
(*10@10, GoNoodle, Just Dance, etc.*)? Yes/No/Sometimes
Comment

8. Do you enjoy break times in the playground? Yes/No/Sometimes

9. How could we make playground breaks better?

Comment

10. Do you enjoy *Active School Week*?

Yes/No

11. What is your favourite part of *Active School Week*?

Comment

12. How could make *Active School Week* better?

Comment

13. Do you know how many minutes of physical activity children should do every day?

15/30/60/90/Don't Know

14. Have you visited the *Active School Flag* section on our school website? If yes, please tell us what you think of it.

Yes/No
Comment

15. We are very busy working towards the *Active School Flag* this year. What do you think about the *Active School Flag* process?

Comment
