

WHERE YOU LIVE...

OPEN HERE!



Tell us about who you live with



What do you like doing?

VERY UNHAPPY



UNHAPPY



NOT SURE



HAPPY



VERY HAPPY



How do you feel? Please tick one

ABOUT YOU...

WHAT WAS DECIDED AT YOUR REVIEW...

YOUR IRO WRITES THIS BIT!

Large empty box for writing the review results.

YOUR REVIEW, YOUR VIEW!

NAME:
DATE:



WRITE OR DRAW IN THE BOXES

ASK AN ADULT TO HELP IF YOU NEED IT

FOR CHILDREN UP TO AGE 11



START



What is it like at school?

What's good?

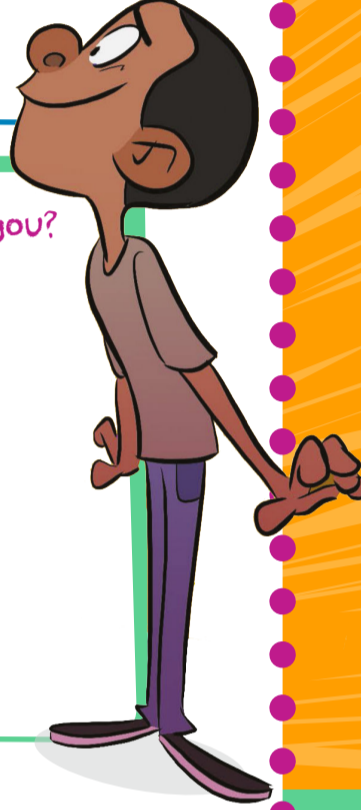
What's not good?



REMEMBER YOU CAN DRAW YOUR ANSWERS!

How do you keep fit and healthy?

What 3 things are most important to you?
1.
2.
3.

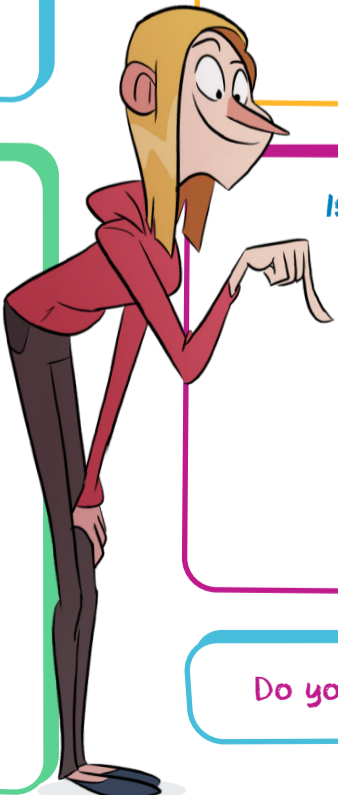


Who is important to you?

What makes you feel happy?

Tell us about your friends

ARE THEY FUN LIKE US?



Is there anything you'd like to change?

Do you feel safe? YES NO NOT SURE

FINISH