

* Required

About you

1.	Please provide your full name *
2.	Postcode *
3.	Please tell who you are responding as? (tick all which apply) *
	Parent or guardian*
	Pupil*
	Governor*
	Member of Staff*
	Local Resident
	Other

Consultation Questions

5. Do you support the proposal to establish a Federation of the Governing Bodies at Pencoedtre and Whitmore High Schools? *
○ Yes
○ No
6. If you support or do not support the proposal, then please explain why.
Please note there is a limit of 4,000 characters on this box. If you would like to submit additional comments please email sustainablecommunitiesforlearning@valeofglamorgan.gov.uk *
<u>sasamablecommanatesronearmilga, valeorgiamorganilgoviak</u>
7. If you would like to suggest any changes or alternatives to the proposals, please detail these below.
Please note there is a limit of 4,000 characters on this box. If you would like to submit additional comments please email sustainablecommunitiesforlearning@valeofglamorgan.gov.uk
sustamablecommunitiesioneaming@valeorgiamorgan.gov.uk
8. Any other comments
Please note there is a limit of 4,000 characters on this box. If you would like to submit additional comments please email
sustainablecommunities for learning @valeofglamorgan.gov.uk

Consultation Report

If you wish to be notified of the publication of the consultation reort via email or post, please provide the relevant details below

9. I	9. I wish to be notified via				
(Email				
(Post				
10. F	Please provide your email address				
11. F	Please provide your postal address				

Equal Opportunities

Please note these questions are optional.

12.	2. What is your gender?			
	\bigcirc	Female		
	\bigcirc	Male		
	\bigcirc	Non-binary		
	\bigcirc	Prefer not to say		
	\bigcirc	Other		
13.	At b	irth were you described as?		
	\bigcirc	Female		
	\bigcirc	Male		
	\bigcirc	Intersex		
	\bigcirc	Prefer not to say		
	\bigcirc	Other		
14.	How	v old are you?		
	\bigcirc	Under 18		
	\bigcirc	18-24		
	\bigcirc	25-34		
	\bigcirc	35-44		
	\bigcirc	45-54		
	\bigcirc	55-74		
	\bigcirc	75+		

15. Are your day-to-day activities limited because of a physical or mental health condition, illness or disability which has lasted, or is expected to last, 12 months or more?			
Yes - limited a lot			
Yes - limited a little			
○ No			
Prefer not to say			
16. How would you describe your national identity?			
Welsh			
○ English			
Scottish			
Northern Irish			
British			
Prefer not to say			
Other			

17. How would you	describe your e	thnic group?			
White - Welsh/English/Scottish/Northern Irish/British					
White - Irish					
White - Gyps	y or Irish Traveller				
Any other wh	ite background				
Mixed/multiple ethnic groups - White and Black Caribbean					
Mixed/multiple ethnic groups - White and Black African					
Mixed/multiple ethnic groups - White and Asian					
Any other mix	Any other mixed/multiple ethnic background				
Asian/Asian B	Asian/Asian British - Indian				
Asian/Asian B	Asian/Asian British - Pakistani				
Asian/Asian B	Asian/Asian British - Bangladeshi				
Asian/Asian British - Chinese					
Any other Asian background					
Black/African/Caribbean/Black British - African					
Black/African/Caribbean/Black British - Caribbean					
Any other Black/African/Caribbean/Black British background					
Other ethnic group - Arab					
Prefer not to	Prefer not to say				
Other					
Other					
18. Please describe	vour Welsh land	guage ability by	ticking the relevan	nt box(es) below	
			-	Good	
Understand	None	Basic	Competent	Good	Fluent
Speak					
Read	O		O	O	<u> </u>
Write	\bigcirc		\bigcirc	\bigcirc	\bigcirc

19.	. Which of the following options best describes how you think of yourself?		
	\bigcirc	Heterosexual / straight	
	\bigcirc	Gay or lesbian	
	\bigcirc	Bisexual	
	\bigcirc	Prefer not to say	
	\bigcirc	Other	
20. What is your religion			
	\bigcirc	No religion	
	\bigcirc	Christian (all denominations)	
	\bigcirc	Buddhist	
	\bigcirc	Hindu	
	\bigcirc	Jewish	
	\bigcirc	Musilm	
	\bigcirc	Sikh	
	\bigcirc	Prefer not to say	
	\bigcirc	Other	
21.	Are	you currently pregnant or have you been pregnant within the last year?	
	\bigcirc	Yes	
	\bigcirc	No	
	\bigcirc	Prefer not to say	
22.	Hav	e you taken maternity leave within the past year?	
	\bigcirc	Yes	
	\bigcirc	No	
	\bigcirc	Prefer not to say	

23. What is your legal marital or same sex civil partnership status?				
\bigcirc	Single, that is never married and never registered in a same sex civil partnership			
\bigcirc	Married and living with husband/wife			
\bigcirc	Separated but still legally married			
\bigcirc	Divorced			
\bigcirc	Widowed			
\bigcirc	In a registered same-sex civil partnership and living with your partner			
\bigcirc	Separated, but still legally in a same-sex civil partnership			
\bigcirc	Formerly in a same-sex civil partnership which is now legally dissolved			
\bigcirc	Surviving partner from a same-sex civil partnership			
\bigcirc	Prefer not to say			

End of consultation

Thank you for completing the online response form. If you have any queries please contact $\underline{sustainable communities for learning} \underline{@valeofglamorgan.gov.uk}$

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