St Luke Primary School & Canary Wharf College



Tell us what you think

Please fill in your details and any comments and return this form to the school reception. Alternatively, you can fold the document, seal it and post it to us using the free post address on the back.

Name:			
First line of address (door number and road name):			
Postcode: Email address:			
1. Are you a? (Please tick the one that applies) Parent / guardian of child who attends the school Person who works in the area Other (please state)			
2. If you are a parent, pupil or staff, how to you predominately travel to school Walk Cycle Taxi Public transport			
3. Do you agree or disagree with the School Street proposal to make Saunders Ness Road (from Stores Quay to Empire Wharf Road), Caledonian Wharf and Storers pedestrian and cycle only zone between 8.15am-9.15am and 3.00pm-4.00pm on school days and Saunders Ness Road from Stores Quay to Empire Wharf Road will be southbound at all times. Agree Disagree Don't know			
4. Do you agree or disagree pedestrianised Glenworth Avenue Agree Disagree Don't know			
5. Do you agree or disagree with the proposed zebra crossing on Manchester Road, giving a more direct access to the school? Agree Disagree Don't know			
6. Do you agree or disagree with general streetscape improvements, including the pocket park, tree planting and greening proposals outside the school? Agree Disagree Don't know			
7. If this proposal is implemented, would it encourage you to walk or cycle to school more? Yes Don't know			
Your Comments			

EQUALITY QUESTIONS

We want to ask you a few questions about yourself because we want to make sure that we have asked lots of different people for their views. We want to make sure that all our services are delivered fairly and include everyone's needs. The information that you provide will help us to improve our services to you and other people in Tower Hamlets.

You do not have to answer these questions. If you choose not to answer these questions, it will not make No

	eceive. To find out more about how we use your data, see our Privacy		
1. Are you responding to this ques business?	tionnaire as an individual or on behalf of an organisation, group or		
Individual	Providing official response of organisation, group or business		
2. How old are you? 0-15 16-24 25-34	35-44 65-74 45-54 75-84 55-64 85+		
Prefer not to say			
3. Which best describes your general Male Female Non-binary	der? I would prefer not to say Other (please specify)		
4. Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months (include any problems related to old age)?			
Yes Please state the type of health pro	No Prefer not to say oblem(s) or disabilit(y/ies) that applies to you.		
Sensory impairment, (such as ing impairment)	s being blind / having a visual impairment or being deaf / having a hear-		
Physical impairment, (such as	s using a wheelchair to get around and / or difficulty using your arms)		
Learning disability, (such as [head-injury)	owns syndrome or dyslexia) or cognitive impairment (such as autism or		
Mental health condition, (such as depression or schizophrenia)			
Long-standing illness or heal epilepsy)	th condition (such as cancer, HIV, diabetes, chronic heart disease, or		
None of the above			
Other/ Prefer to self-describ	e (please specify below):		
Prefer not to say			

5. How would you describe your ethnic group?				
White: British		Mixed/Dual Heritage: White & Black Caribbean		
White: Irish		Mixed/Dual Heritage: White & Black African		
White: Traveller of Irish heritage		Mixed/Dual Heritage: White & Asian		
White: Gypsy/Roma		Mixed/Dual Heritage: Any other Mixed background		
White: Any other White background				
Asian or Asian British: Indian		Black or Black British: Somali		
Asian or Asian British: Pakistani		Black or Black British: Other African		
Asian or Asian British: Bangladeshi		Black or Black British: Caribbean		
Asian or Asian British: Chinese		Black or Black British: Any other Black background		
Asian or Asian British: Vietnamese				
Asian or Asian British: Any other Asian ba	ckgro	und		
Other Ethnic Groups: Any other backgro	und	Prefer not to say		
6. Which of the following best describes how you think of yourself?				
Heterosexual (straight)		Bisexual		
Gay man		Other		
Gay woman (lesbian)		Prefer not to say		
		,		
7. What is your religion?				
No religion		Muslim		
Christian	Ħ	Sikh		
Buddhist	Ħ	Any other religion (please specify)		
Hindu		· · · · · · · · · · · · · · · · · · ·		
Jewish		Prefer not to say		
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8. What is your marital status?				
Single, never married		Widowed		
Married or civil partnership	Ħ	Divorced / separated		
Co-habiting	Ħ	Prefer not to say		
9. Are you currently pregnant or have you been pregnant in the last year?				
Yes		Prefer not to say		
No	Ħ	Not applicable		
		The applicable		
10. Have you seen any publicity about this strat	eav?			
Workshop / stall		Advertising board		
Council website / newsletter	H	Word of mouth		
Social media	H	I haven't seen any publicity		
Newspaper	ш	Thaven escenting positions		
Please provide any additional details about the publicity you have seen				
Thease provide any additional details about the publicity you have seen				

Your data will be transferred to London Borough of Tower Hamlets, processed and stored in accordance with the General Data Protection Regulation (GDPR). Your data will not be used for marketing purposes and will only be used for the purpose of receiving updates on this project.

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To view our privacy notice, you can visit www.towerhamlets.gov.uk/privacynotice

Fair processing notice

The Council will use the information you provide for the purpose of this proposal. We will not share the information with other Council departments or external bodies. We will always process your information in accordance with the law. For more information on the basis on which we process, use and store your information, please refer to our Privacy Policy: https://communitycatalogue.towerhamlets.gov.uk/about-this-site/privacy-notice

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