

Identification Label

# PIRLS & TIMSS 2011

## Learning to Read Survey

### <Grade 4>

<PIRLS National Research Center Name> <Address>



TIMSS & PIRLS International Study Center Lynch School of Education, Boston College



### Learning to Read Survey

Your child's class has been selected to participate in the Progress in International Reading Literacy Study (PIRLS) and the Trends in Mathematics and Science Study (TIMSS). PIRLS and TIMSS are research studies about how children learn to read and do mathematics and science. These studies are sponsored by the International Association for the Evaluation of Educational Achievement (IEA) and are being conducted in more than 60 countries around the world.

This survey asks about your child's early learning experiences. We are interested in what you and your child do together and what you think about different things related to your child's school. There are no right or wrong answers to these questions.

The information being collected will be extremely useful for helping understand how young children learn and for helping to improve the teaching and learning for all children. We ask that you respond to all of the questions you feel comfortable answering. We would like to reassure you, however, that your responses to this survey are confidential.

This survey should be completed by the child's parent or current <primary caregiver>, or jointly by both parents or <primary caregivers>.

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1 💼

#### This survey was completed by:

#### Check **one** circle for each line.

	Yes	No
Mother, stepmother, or female guardian	()	$-\bigcirc$
Father, stepfather, or male guardian	()	-0
Other	()	- ()

#### Please turn the page

#### Before Your Child Began Primary/Elementary School

2 \_

Before your child began primary/elementary school, how often did you or someone else in your home do the following activities with him or her?

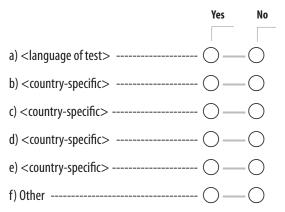
#### Check **one** circle for each line.

		Often	
			Sometimes
			Never or almost never
a)	Read books	-()	)-()
b)	Tell stories	-(	$)-\bigcirc$
c)	Sing songs	-	$)-\bigcirc$
d)	Play with alphabet toys (e.g., blocks with letters of the alphabet)	-	)-O
e)	Talk about things you had done	-	)-O
f)	Talk about what you had read	-	)-O
g)	Play word games	-	$)-\bigcirc$
h)	Write letters or words	-	$)-\bigcirc$
i)	Read aloud signs and labels	-	$)-\bigcirc$
j)	Say counting rhymes or sing counting songs	-	)-O
k)	Play with number toys (e.g., blocks with numbers)	-	)-O
I)	Count different things	-	$)-\bigcirc$
m	Play games involving shapes (e.g., shape sorting toys, puzzles)	-	)-O
n)	Play with building blocks or construction toys	-	)-O
0)	Play board games or card games	-	)-O

#### What language did your child speak before he/she began school?

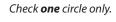
If your child spoke more than one language at the same time, you can check "Yes" for more than one language.

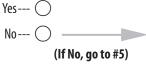
Check one circle for each line.

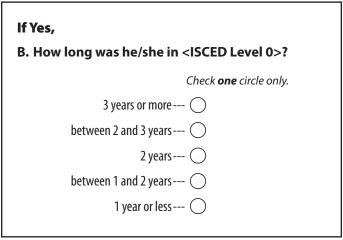




A. Did your child attend <ISCED Level 0>?









### How old was your child when he/she began primary/elementary school?

Check one circle only.

5 years old or younger --- 🔘

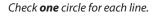
6 years old --- 🔿

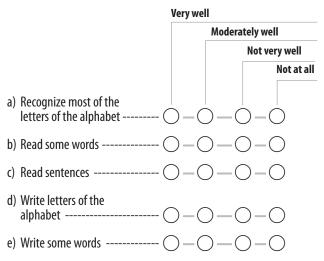
7 years old --- 〇

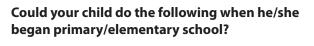
8 years old or older --- 〇

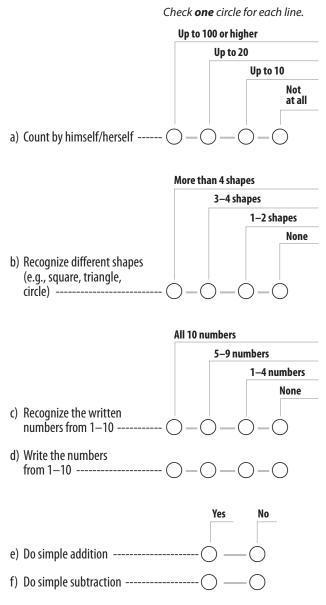
6

How well could your child do the following when he/she began primary/elementary school?









8 \_

### On average, how much time does your child spend on homework in a day?

Check one circle only.



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### How often do you or someone else in your home do the following things with your child?

Check <b>one</b> circle for each line.		
Every day or almost every day		
	Once or twice a week	
	Once or twice a month	
	Never or almost never	
a) Discuss my child's schoolwork with him/her	-0-0-0-0	
b) Help my child with his/her schoolwork	-0-0-0-0	
c) Make sure my child sets aside time to do his/her homework	-0-0-0-0	
d) Ask my child what he/she learned in school	-0-0-0-0	
e) Check if my child has done his/her homework	-0-0-0-0	
f) Help my child practice his/her reading	-0-0-0-0	
g) Help my child practice his/her math skills	-0-0-0-0	
h) Talk with my child about what he/she is reading	-0-0-0-0	

9

10 \_\_\_\_\_

#### What do you think of your child's school?

Check **one** circle for each line.

Agree a lot		
	Agree a little	
	Disagree a little	
	Disagree a lot	
a) My child's school includes me in my child's education		
b) My child's school should make a greater effort to include me in my child's education	0-0-0-0	
c) My child's school provides a safe environment	0-0-0-0	
d) My child's school cares about my child's progress in school	0-0-0-0	
e) My child's school should do better at keeping me informed of his/her progress	0-0-0-0	
<li>f) My child's school does a good job in helping him/her become better in <u>reading</u></li>	0-0-0-0	
g) My child's school does a good job in helping him/her become better in <u>mathematics</u>	0-0-0-0	
<ul> <li>h) My child's school does a good job in helping him/her become better in <u>science</u></li> </ul>	0-0-0-0	

#### In a typical week, how much time do you usually spend reading <u>for yourself</u> at home, including books, magazines, newspapers, and materials for work (in print or electronically)?

Check **one** circle only.

Less than one hour a week---- 1-5 hours a week---- 6-10 hours a week---- More than 10 hours a week----

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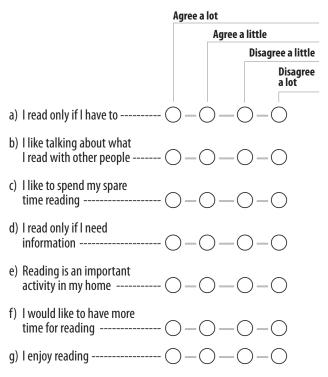
When you are at home, how often do you read for your own enjoyment?

Check one circle only.

Every day or almost every day --- Once or twice a week --- Once or twice a month --- Once or twice a month --- Never or almost never --- O

### Please indicate how much you agree with the following statements about reading.

Check one circle for each line.



14 💼

About how many books are there in your home? (Do not count magazines, newspapers or children's books.)

Check one circle only.

15 🗖

A. About how many <u>children's</u> books are there in your home? (Do not count children's magazines or school books.)

Check one circle only.

#### B. Are these books mainly in <language of test>?

Check one circle only.

16 🗖

When talking at home with your child, what language does the child's father (or stepfather or male guardian) use most often? What language does the child's mother (or stepmother or female guardian) use most often?

#### Check one circle in each column.

	Child's father	Child's mother
a) <language of="" test=""></language>		$\bigcirc$
b) <country-specific></country-specific>		$\bigcirc$
c) <country-specific></country-specific>		
d) <country-specific></country-specific>		
e) <country-specific></country-specific>		
f) Other		
g) Not applicable		

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What is the highest level of education <u>completed</u> by the child's father (or stepfather or male guardian) and mother (or stepmother or female guardian)?

#### Check **one** circle in each column.

	Child's father	Child's mother
a) Did not go to school		$\bigcirc$
b) Some <isced 1="" 2="" level="" or=""></isced>		$\bigcirc$
c) <isced 2="" level=""></isced>		$\bigcirc$
d) <isced 3="" level=""></isced>		
e) <isced 4="" level=""></isced>		
f) <isced 5b="" level=""></isced>		
g) <isced 5a,="" degree<="" first="" level="" td=""><td>&gt; (</td><td></td></isced>	> (	
h) Beyond <isced 5a,<br="" level="">first degree&gt;</isced>		$\bigcirc$
i) Not applicable		

### How far in his/her education do you expect your child to go?

Check one circle only.



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Which best describes the employment situation of the child's father (or stepfather or male guardian) and mother (or stepmother or female guardian)?

#### Check **one** circle in each column.

	Child's father	Child's mother
a) Working at least full-time for pay (this could be one or more full-time jobs or several part-time jobs that add up to full-time work)	()	0
b) Working part-time only for pa	ay	
c) Not working for pay		
d) Other		
e) Not applicable		

#### What kind of work do the child's father (or stepfather or male guardian) and mother (or stepmother or female guardian) do for their main jobs?

For each, check the circle for the job category that best describes what he/she does. Each category has a few examples to help you decide the correct category. If the father or mother is not working now, think about the last job he/she had.

Check <b>one</b> circle	Check <b>one</b> circle in each column.	
	ild′s her	Child's mother
a) Has never worked for pay	$\bigcirc$	$\bigcirc$
b) Small Business Owner Includes owners of small businesses (fewer than 25 employees) such as retail shops, services, restaurants	$\bigcirc$	
c) Clerk Includes office clerks; secretaries; typists; data entry operators; customer service clerks		$\bigcirc$
d) Service or Sales Worker		
e) Skilled Agricultural or Fishery Worker Includes farmers; forestry workers; fishery workers; hunters and trappers		$\bigcirc$
f) Craft or Trade Worker Includes builders, carpenters, plumbers, electricians, metal workers; machine mechanics; handicraft workers		$\bigcirc$
g) Plant or Machine Operator Includes plant and machine operators; assembly-line operators; motor-vehicle drivers		$\bigcirc$
h) General Laborers Includes domestic helpers and cleaners; building caretakers; messengers, porters, and doorkeepers; farm, fishery, agricultural, and construction workers		
i) Corporate Manager or Senior Official		
j) Professional		
k) Technician or Associate Professional		
l) Not applicable	$\bigcirc$	$\bigcirc$

Check **one** circle in each column.

Thank you for taking the time to fill out this survey.



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