

Identification Label

Student ID:	<input type="text"/>
Student Name:	<input type="text"/>
School Name:	<input type="text"/>

Progress in International Reading Literacy Study

PIRLS 2006

LEARNING TO READ SURVEY

<PIRLS National Research Center Name>
<Address>



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Evaluation of Educational Achievement

Learning to Read Survey

Your child's class has been selected to participate in the Progress in International Reading Literacy Study (PIRLS), a research study about how children learn to read. PIRLS is sponsored by the International Association for the Evaluation of Educational Achievement (IEA) and is being conducted in about 40 countries around the world.

This survey asks about your child's experiences in learning to read. We are interested in what you and your child do 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 to read and for helping to improve the teaching and learning of reading 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>.

PIRLS2006



1

This survey was completed by:

Check one circle for each line.

	Yes	No
Mother, stepmother, or female guardian	<input checked="" type="radio"/>	<input type="radio"/>
Father, stepfather, or male guardian	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>

ASBHCPL1

ASBHCPL2

ASBHCPL3



Before Your Child Began <ISCED Level 1>

2

Before your child began <ISCED Level 1>, how often did you or someone else in your home do the following activities with him or her?

Check **one** circle for each line.



- ASBHHA01 a) Read books ----- ○ ○ ○
- ASBHHA02 b) Tell stories ----- ○ ○ ○
- ASBHHA03 c) Sing songs ----- ○ ○ ○
- ASBHHA04 d) Play with alphabet toys (for example, blocks with letters of the alphabet) ----- ○ ○ ○
- ASBHHA05 e) Talk about things you had done ----- ○ ○ ○
- ASBHHA06 f) Talk about what you had read ----- ○ ○ ○
- ASBHHA07 g) Play word games ----- ○ ○ ○
- ASBHHA08 h) Write letters or words ----- ○ ○ ○
- ASBHHA09 i) Read aloud signs and labels ----- ○ ○ ○
- ASBHHA10 j) Visit a library ----- ○ ○ ○
- ASBHHA11 k) <country-specific> ----- ○ ○ ○

3

In what language did most of the activities in Question 2 take place?

Check **one** circle only.

- <Language of test> ----- ○
- Another language ----- ○

ASBHAHL

4

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) <language of test> ----- ○ ○
- b) <country-specific> ----- ○ ○
- c) <country-specific> ----- ○ ○
- d) <country-specific> ----- ○ ○
- e) <country-specific> ----- ○ ○
- f) Other ----- ○ ○

ASBHLBS1
ASBHLBS2
ASBHLBS3
ASBHLBS4
ASBHLBS5
ASBHLBS6

5

Did your child attend <ISCED Level 0>?

Check **one** circle only.

- Yes ----- ○
 - No ----- ○
- (If No, go to #6)

ASBHOATT

If Yes...

a. How long was he/she in <ISCED Level 0>?

Check **one** circle only.

- 3 years or more ----- ○
- between 2 and 3 years ----- ○
- 2 years ----- ○
- between 1 and 2 years ----- ○
- 1 year or less ----- ○

ASBHOHL0

Beginning <ISCED Level 1>

6

How old was your child when he/she began <ISCED Level 1>?

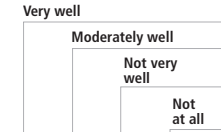
Check **one** circle only.

- 5 years old or younger ----
- 6 years old ----
- 7 years old ----
- 8 years old or older ----

7

How well could your child do the following when he/she began <ISCED Level 1>?

Check **one** circle for each line.



- a) Recognize most of the letters of the alphabet -----
- b) Read some words -----
- c) Read sentences -----
- d) Write letters of the alphabet -----
- e) Write some words -----

ASBHAGE

ASBHAI B1

ASBHAI B2

ASBHAI B3

ASBHAI B4

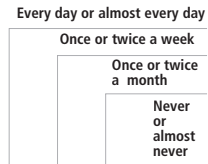
ASBHAI B5

Activities With Your Child More Recently

8

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

Check **one** circle for each line.



- a) Listen to my child read aloud -----
- b) Talk with my child about things we have done -----
- c) Talk with my child about what he/she is reading on his/her own -----
- d) Discuss my child's classroom reading work with him/her ---
- e) Go to the library or a bookstore with my child -----
- f) Help my child with reading for school -----

ASBHDOT1

ASBHDOT2

ASBHDOT3

ASBHDOT4

ASBHDOT5

ASBHDOT6

9

In what language do most of the activities in Question 8 take place?

Check **one** circle only.

- <Language of test> ----
- Another language ---

ASBHACTL

ASBHTSOH

10 _____

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

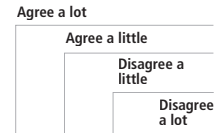
Check **one** circle only.

- My child does not have homework -----○
- 15 minutes or less-----○
- 16-30 minutes -----○
- 31-60 minutes -----○
- More than 60 minutes-----○

11 _____

What do you think of your child's school?

Check **one** circle for each line.



- 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-----○
- c) My child's school cares about my child's progress in school -----○
- d) My child's school does a good job in helping my child become better in reading -----○

ASBHTAC1

ASBHTAC2

ASBHTAC3

ASBHTAC4

Literacy in the Home

ASBHREAD

12

In a typical week, how much time do you usually spend reading **for yourself** at home, including books, magazines, newspapers, and materials for work?

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 ----

13

ASBHRRE

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

Check **one** circle only.

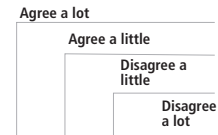
- Every day or almost every day ---
- Once or twice a week ----
- Once or twice a month ----
- Never or almost never ----

Literacy in the Home

14

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

Check **one** circle for each line.



- a) I read only if I have to -----
- b) I like talking about books with other people -----
- c) I like to spend my spare time reading -----
- d) I read only if I need information -----
- e) Reading is an important activity in my home -----

ASBHSTM1

ASBHSTM2

ASBHSTM3

ASBHSTM4

ASBHSTM5

15

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

Check **one** circle only.

- 0 - 10 ----
- 11 - 25 ----
- 26 - 100 ----
- 101 - 200 ----
- more than 200 ----

ASBHBOOK

ASBHCHBK

16

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

Check **one** circle only.

- 0 - 10 ----
- 11 - 25 ----
- 26 - 50 ----
- 51 - 100 ----
- more than 100 ----

ASBHCHBL

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

Check **one** circle only.

- Yes ----
- No ----

ASBH LAHF
ASBH LAHM

17

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> ----- | <input type="radio"/> | <input type="radio"/> |
| b) <country-specific> ----- | <input type="radio"/> | <input type="radio"/> |
| c) <country-specific> ----- | <input type="radio"/> | <input type="radio"/> |
| d) <country-specific> ----- | <input type="radio"/> | <input type="radio"/> |
| e) <country-specific> ----- | <input type="radio"/> | <input type="radio"/> |
| f) Other ----- | <input type="radio"/> | <input type="radio"/> |
| g) Not applicable ----- | <input type="radio"/> | <input type="radio"/> |

Additional Information

18

What is the highest level of education **completed** 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) Some <ISCED Level 1 or 2> or did not go to school ----- | <input type="radio"/> | <input type="radio"/> |
| b) <ISCED Level 2> ----- | <input type="radio"/> | <input type="radio"/> |
| c) <ISCED Level 3> ----- | <input type="radio"/> | <input type="radio"/> |
| d) <ISCED Level 4> ----- | <input type="radio"/> | <input type="radio"/> |
| e) <ISCED Level 5B> ----- | <input type="radio"/> | <input type="radio"/> |
| f) <ISCED Level 5A, first degree> ----- | <input type="radio"/> | <input type="radio"/> |
| g) Beyond <ISCED Level 5A, first degree> ----- | <input type="radio"/> | <input type="radio"/> |
| h) Not applicable ----- | <input type="radio"/> | <input type="radio"/> |

ASBHLEDF
ASBHLEDM

19

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) ----- | <input type="radio"/> | <input type="radio"/> |
| b) Working part-time only for pay ----- | <input type="radio"/> | <input type="radio"/> |
| c) Not working for pay, but looking for a job ----- | <input type="radio"/> | <input type="radio"/> |
| d) Other ----- | <input type="radio"/> | <input type="radio"/> |
| e) Not applicable ----- | <input type="radio"/> | <input type="radio"/> |

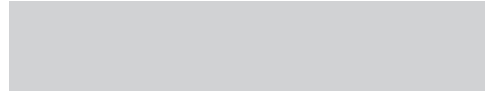
ASBHEMPF
ASBHEMPM

ASBHMJF
ASBHMJM

20 _____

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 box 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 **one** circle in each column.

	Child's father	Child's mother
a) Has never worked outside the home for pay -----	<input type="radio"/>	<input type="radio"/>
b) Small Business Owner ----- <small>Includes owners of small business (fewer than 25 employees) such as retail shops, services, restaurants</small>	<input type="radio"/>	<input type="radio"/>
c) Clerk ----- <small>Includes office clerks; secretaries; typists; data entry operators; customer service clerks</small>	<input type="radio"/>	<input type="radio"/>
d) Service or Sales Worker ----- <small>Includes travel attendants; restaurant service workers; personal care workers; protective service workers; salespersons</small>	<input type="radio"/>	<input type="radio"/>
e) Skilled Agricultural or Fishery Worker ----- <small>Includes farmers; forestry workers; fishery workers, hunters and trappers</small>	<input type="radio"/>	<input type="radio"/>
f) Craft or Trade Worker ----- <small>Includes builders, carpenters, plumbers, electricians, etc.; metal workers; machine mechanics; handicraft workers</small>	<input type="radio"/>	<input type="radio"/>
g) Plant or Machine Operator ----- <small>Includes plant and machine operators; assembly-line operators; motor-vehicle drivers</small>	<input type="radio"/>	<input type="radio"/>
h) General Laborers ----- <small>Includes domestic helpers and cleaners; building caretakers; messengers, porters and doorkeepers; farm, fishery, agricultural, and construction workers</small>	<input type="radio"/>	<input type="radio"/>
i) Corporate Manager or Senior Official ----- <small>Includes corporate managers such as managers of large companies (25 or more employees) or managers of departments within large companies; legislators or senior government officials; senior officials of special-interest organizations; military officers</small>	<input type="radio"/>	<input type="radio"/>
j) Professional ----- <small>Includes scientists; mathematicians; computer scientists; architects; engineers; life science and health professionals; teachers; legal professionals; social scientists; writers and artists; religious professionals</small>	<input type="radio"/>	<input type="radio"/>
k) Technician or Associate Professional ----- <small>Includes science, engineering, and computer associates and technicians; life science and health technicians and assistants; teacher aides; finance and sales associate professionals; business service agents; administrative assistants</small>	<input type="radio"/>	<input type="radio"/>
l) Not applicable -----	<input type="radio"/>	<input type="radio"/>

ASBHWELL

21 _____

Compared with other families, how well-off do you think your family is financially?

Check **one** circle only.

- Very well-off ----
- Somewhat well-off ----
- Average ----
- Not very well-off ----
- Not at all well-off ----

ASBHCOMP

22 _____

About how long did it take you to complete this survey?

_____ minutes
Write in a number.

Thank You

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

TIMSS & PIRLS International Study Center
Lynch School of Education, Boston College
pirls.bc.edu



**BOSTON
COLLEGE**

Progress in International Reading Literacy Study

PIRLS 2006

LEARNING TO READ SURVEY



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