ECLS-B Kindergarten 2007 National Study:
Parent Interview

August 17, 2007

RTI International
Research Triangle Park, North Carolina

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Section 1-IN: INTRODUCTION

IN00IP. IS THIS INTERVIEW BEING CONDUCTED IN-PERSON?

>> YES   1
>> NO   2

>   IF NO, DISPLAY ACTIVE SIGNAL MSG:
>   YOU HAVE INDICATED THAT THIS INTERVIEW IS NOT BEING CONDUCTED
>   IN-PERSON.
>   IF THE INTERVIEW IS IN-PERSON, PRESS ENTER AND CHANGE YOUR
>   RESPONSE.
>   IF THIS IS A TELEPHONE INTERVIEW, PRESS 'S' TO CONTINUE.

IN000LN.   INDICATE WHETHER YOU ARE USING THE ENGLISH OR SPANISH WORDING
>   IN THE CAPI PROGRAM.

>> ENGLISH   1
>> SPANISH   2

IN000IN.   IS THE INTERVIEW BEING CONDUCTED USING AN INTERPRETER?

>> YES   1 (ININCON)
>> NO   2 (IN000LG)

If YES, display:

ALERT! YOU HAVE INDICATED THAT YOU ARE USING AN INTERPRETER. PLEASE
CONFIRM YOUR RESPONSE. ARE YOU USING A PAID INTERPRETER TO CONDUCT THIS
INTERVIEW?

IF YOU ARE NOT USING A PAID INTERPRETER, BACK UP AND CHANGE YOUR
RESPONSE.

ININCON.   YOU MUST OBTAIN INTERPRETER'S SIGNED AND NOTARIZED AFFIDAVIT
>   OF NONDISCLOSURE AND SIGNED CONFIDENTIALITY AGREEMENT
>   BEFORE BEGINNING INTERVIEW.

>   SUBMIT THESE FORMS WITH THE CASE FOLDER.

>   DO YOU HAVE THE INTERPRETER'S SIGNED AND NOTARIZED AFFIDAVIT
>   OF NONDISCLOSURE?

>> YES   1
>> NO   2

>   IF NO, DISPLAY ACTIVE SIGNAL MESSSAGE

>   YOU MUST HAVE SIGNED FORMS FROM THE INTERPRETER TO
>   CONTINUE WITH THE INTERVIEW.

IF YOU DO HAVE SIGNED FORMS, PRESS ENTER AND CHANGE YOUR RESPONSE.

IF YOU DO **NOT** HAVE SIGNED FORMS, BREAKOFF USING ALT-X."

IN000LG.   IS RESPONDENT {CHILD/TWIN}'S LEGAL GUARDIAN?

YES   1
NO   2

IF NO, DISPLAY ACTIVE SIGNAL MSG:

REMINDER: YOU CANNOT CONDUCT THE CHILD ASSESSMENT AND WE CANNOT CONTACT THE WECEP PROVIDERS OR TEACHERS WITHOUT THE PERMISSION OF THE CHILD'S LEGAL GUARDIAN.

PRESS 'S' TO CONTINUE WITH THE PARENT INTERVIEW.

IN000CN.   GIVE {PARENT/FOSTER PARENT} {CONSENT FORM FOR CHILD AND PARENT/CONSENT FORM FOR FOSTER PARENT} TO RESPONDENT AND ASK HIM/HER TO READ IT. PARENT DOES <u>NOT</u> NEED TO SIGN AND RETURN FORM.

DISPLAY INSTRUCTIONS: Display "**FOSTER PARENT CONSENT FOR FOSTER PARENT PARTICIPATION IN THE ECLS-B KINDERGARTEN 2007 ROUND**" if IN000LG = 2. Else display "**PARENT CONSENT FOR CHILD AND PARENT'S PARTICIPATION IN THE ECLS-B KINDERGARTEN 2007 ROUND**."

IN000CFa. Have you read, or has someone read to you, the information on the consent form I gave you, had a chance to ask questions, and had your questions answered?

YES

NO

IF NO, DISPLAY ACTIVE SIGNAL MSG:

ASK RESPONDENT TO READ FORM AND ANSWER HIS/HER QUESTIONS.

IN000CFb.   Do you voluntarily agree to take part in this study and for your child(ren) to take part?

YES

NO (INTERVIEW WILL TERMINATE)

IN000CR.   We are using a new quality control (QC) system. The system runs on the computer and may record what you and I say to each other during parts of the interview. Neither you nor I will know when the computer is recording what we

say. The recording will be reviewed by people at RTI to monitor my work. The recordings will only be used for those purposes, and will be kept confidential. The project staff who listen to the recording will know who I am, but will not know who you are. May we use the QC system during the interview?

> YES

> NO (DO NOT ENABLE CARI)

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                          IN000AVBX
         IF IN000LG = 2 (NOT CHILD'S LEGAL GUARDIAN),
              GO TO IN000ST.  ELSE ASK IN000AVa.
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IN000AVa.   We would like to keep the audiotape recording{s} of your child{ren} from the ECLS-B study for use by researchers in the future. Your name will not be associated with the recording{s} and the researchers will have to sign confidentiality pledges before they can use your recording{s}.

Do we have your permission to archive the audiotape recording{s} obtained in **this** round of the ECLS-B survey?

> YES
> NO

IN000ST   **HELP AVAILABLE**

IN WHAT STATE IS THIS INTERVIEW BEING CONDUCTED?

PRESS ENTER TO ACCEPT STATE {STATE ABBREVIATION} BELOW OR ENTER STATE ABBREVIATION....

USE [F12] TO CHECK STATE CODES, IF YOU ARE UNCERTAIN.

IN001.
CHLDINHH

DISPLAY INSTRUCTIONS: Display Child's full name from K'06 interview. If child's middle name is 'NMN' then do not display.

CASE: {CASEID OF CASE SELECTED}
CHILD'S NAME: {CHILD'S FULL NAME}
TWIN'S NAME (IF APPLICABLE): {TWIN'S FULL NAME}

> Is {CHILD'S FULL NAME} still living in this household?

> 1 YES (IN008BX)
> 2 NO

IN005.

Where is {CHILD} now?

LIVING ELSEWHERE...1
DECEASED..2

IN002PRE

DISPLAY INSTRUCTIONS:
Display Child's full name from K '06 interview. If Child's middle name is 'NMN' then do not display.

TO CONDUCT THE INTERVIEW, {CHILD'S FULL NAME} MUST BE LIVING IN THIS
HOUSEHOLD.

IN008BX
IF K '06 FLAG INDICATES TWIN WAS LIVING IN HOUSEHOLD AT
TIME OF K '06 INTERVIEW GO TO IN010 [TWININHH].
OTHERWISE, GO TO IN007.

IN010.
TWININHH

DISPLAY INSTRUCTIONS:
Display Child's and Twin's full names from K '06 interview. If Child's/Twin's middle name is 'NMN'
then do not display.

K '06 INTERVIEW INDICATES {CHILD'S FULL NAME} HAS A TWIN NAMED {TWIN's
FULL NAME}.

Is {TWIN'S FULL NAME} still living in this household?

YES...1 (IN0007)
NO...2

IN012.
TWINLIVE

DISPLAY INSTRUCTIONS:
Display Child's and Twin's full names from K '06 interview. If Child's/Twin's middle name is 'NMN'
then do not display.

K '06 INTERVIEW INDICATES {CHILD'S FULL NAME} HAS A TWIN NAMED {TWIN's
FULL NAME}.

Where is {TWIN'S FULL NAME} now?

LIVING ELSEWHERE...1
DECEASED..2
REFUSED..RF
DON'T KNOW..DK

IN007.
RROSTNUM

DISPLAY INSTRUCTIONS:
Display the household roster from the K '06 interview.
Display full names and ages of all household members 15 and older as follows: Number, {Full Name},

APPROX {Age} YEARS, {RelationType} Where number is the person's position on the display, but not necessarily on the HH Roster.

VERIFY RESPONDENT'S FULL NAME.

ENTER THE NUMBER NEXT TO THE PERSON ON THE HOUSEHOLD ROSTER WHO IS THE CURRENT ROUND RESPONDENT. AGE INFORMATION MAY NOT BE EXACT, AND SHOULD BE USED AS REFERENCE ONLY TO HELP YOU IDENTIFY THE CORRECT RESPONDENT.
IF NAME NOT LISTED, ENTER 0.

IF RROSTNUM = 0, ASK IN007A. ELSE, ASK IN007B

IN007A

YOU HAVE INDICATED THAT THE RESPONDENT IS NOT ONE OF THE PEOPLE LISTED. PLEASE VERIFY THAT THE RESPONDENT IS NOT AMONG THIS LIST.

IF THE RESPONDENT IS LISTED, BACKUP AND CHANGE YOUR RESPONSE TO THE PREVIOUS QUESTIONS.

DISPLAY SAME LIST AS IN RROSTNUM (IN007)

RESPONDENT IS NOT IN THE LIST …………..……………….5

IN007B

YOU HAVE INDICATED THAT THE RESPONDENT IS:

NAME: ^IN007RName
AGE: ^IN007RAge
RELATIONSHIP: ^IN007RRelate

PLEASE VERIFY YOUR RESPONSE. IF ^IN007RName IS NOT THE RESPONDENT, PLEASE BACKUP AND CHANGE YOUR RESPONSE. "

RESPONDENT IS ^IN007RnAME, ^IN007RRelate ..…………..7

IN015PRE.

DISPLAY INSTRUCTIONS:
Display Child's full name from K '06 interview for {CHILD'S FULL NAME}, and if IN010 [TWININHH] = 1 display Twin's full name from K '06 interview for {TWIN'S FULL NAME}.

If child's (or twin's) middle name is 'NMN' then do not display.

If there is a twin in the household (IN010 [TWININHH] =1), display "I will first ask questions about…" and "{and{TWIN}}".

If K'07 respondent is the same as the K '06 respondent (FLAGS.SAMERESP =1), then display "Some of the questions are the same as…" and "the information about you and about {CHILD}…" and "I also have a few questions about the other…".

Else if the K'07 respondent is not the same as the K '06 respondent (FLAGS.SAMERESP=2), then display "some information about {CHILD}…" and "I also have a few questions about you and the other…"

> "During this interview, I will be asking questions about {CHILD'S FULL NAME}'s {and {TWIN'S FULL NAME}'s} more recent experiences and about you and your household. {I will first ask questions about {CHILD} and your family life. Then I will ask questions specifically about {TWIN}. After that, I will ask more questions about you and your household.} {Some of the questions are the same as in the last interview, and there are some new questions, too}. Before we begin, I need to verify {the information about you and about {CHILD}{and {TWIN}}} that we collected during the last interview/some information about {you and about} {CHILD} {and {TWIN}}. I also have a few questions about {the/you and the} other people living here."

IN017BX
IF FLAGS.SAMERESP=1 (YES, SAME RESPONDENT) OR (FLAGS.SAMERESP = NO (NOT SAME RESPONDENT) AND IN007 [RROSTNUM] ^=0 (NEW RESPONDENT WAS IN THE HOUSEHOLD AT K '06)) AND CURRENT K '07 RESPONDENT WAS GIRLFRIEND OR PARTNER OF CHILD'S PARENT/GUARDIAN (K '06 IN035 [RESPRELC] = 5), BOYFRIEND OR PARTNER OF CHILD'S PARENT/GUARDIAN (K '06 IN035 [RESPRELC] = 6), OTHER NON-RELATIVE (K '06 IN035 [RESPRELC] = 13), CHILD'S STEPMOTHER (K '06 IN040 [TYPEMOM] = 3), FOSTER MOTHER OR FEMALE GUARDIAN (K '06 IN040 [TYPEMOM] = 4), STEPFATHER (K '06 IN045 [DADTYPE] = 3), OR FOSTER FATHER OR MALE GUARDIAN (K '06 IN045 [DADTYPE] = 4) THEN GO TO IN019 [RRELSAME]. ELSE, GO TO IN022BX.

IN019.
RRELSAME

DISPLAY INSTRUCTIONS:
If at K '06 current respondent was GIRLFRIEND OR PARTNER OF CHILD'S
PARENT/GUARDIAN (K '06 IN035 [RESPRELC] = 5), or BOYFRIEND OR PARTNER OF CHILD'S
PARENT/GUARDIAN (K '06 IN035 [RESPRELC] = 6) display "the {girlfriend/boyfriend} or partner of
{CHILD}'s {and {TWIN}}'s parent or guardian".

Else if at K '06 current respondent was CHILD's OTHER NON-RELATIVE (K '06 IN035 [RESPRELC] =
13) then display {K '06 IN035 [RESPRELC]}.

Else if K '06 respondent was CHILD's STEPMOTHER (K '06 IN040 [TYPEMOM] = 3) or FOSTER
MOTHER OR FEMALE GUARDIAN (K '06 IN040 [TYPEMOM] = 4) then display {K '06 IN040
[TYPEMOM]}.

Else if K '06 respondent was CHILD's STEPFATHER (K '06 IN045 [DADTYPE] = 3) or FOSTER FATHER
OR MALE GUARDIAN (K '06 IN045 [DADTYPE] = 4) then display {K '06 IN045 [DADTYPE]}.

> Sometimes relationships change. I have recorded that you are {CHILD}'s {and {TWIN}}'s
> {K '06 IN035/IN040/IN045} [RESPRELC/TYPEMOM/DADTYPE]. Is this still correct?
>
>   YES...1
>   NO..2
>   REFUSED...RF
>   DON'T KNOW...DK

IN022BX
IF FLAGS.SAMERESP=1 (SAME RESPONDENT AS AT K '06), IN019
[RRELSAME] = NO, GO TO IN035 [RESPRELC]. ELSE IF
FLAGS.SAMERESP = 1 (SAME RESPONDENT AS AT K '06) AND
(IN019 [RRELSAME] = EMPTY (NOT ASKED) OR IN019 [RRELSAME]
= YES), GO TO IN062BX. ELSE IF FLAGS.SAMERESP=2 (NEW
RESPONDENT) AND IN007 [RROSTNUM] = 0 (RESPONDENT NOT
ON LIST), GO TO IN025 [RESPFNAM]. ELSE IF
FLAGS.SAMERESP=2 (NEW RESPONDENT) AND IN007
[RROSTNUM] ^= 0 (RESPONDENT ON LIST), GO TO IN031
[RESPDOBM].

IN025.   May I have your full name, please?
RESPFNAM

      ENTER RESPONDENT'S FIRST NAME.

      VERIFY SPELLING.

IN026.   [May I have your full name, please?]
RESPMNM

ENTER RESPONDENT'S MIDDLE NAME.

VERIFY SPELLING.

IF NO MIDDLE NAME OR INITIAL, ENTER "NMN".

IN027.   [May I have your full name, please?]
RESPLNAM

ENTER RESPONDENT'S LAST NAME
VERIFY SPELLING.

IN031.   What is your birth date?
RESPDOBM

Answer must be in the range from 1 up to 12
       |__|__|
       ENTER MONTH OF BIRTH.

       REFUSED...RF
       DON'T KNOW..DK

IN032.
RESPDOBD

DISPLAY INSTRUCTIONS:
Display number entered at IN031 [RESPDOBM] at top of screen.

[What is your birth date?]
       Answer must be in the range from 1 up to 31
       |__|__|
       ENTER DAY OF BIRTH.

       REFUSED...RF
       DON'T KNOW..DK

IN033.
RESPDOBY

DISPLAY INSTRUCTIONS:
Display numbers entered at IN031 [RESPDOBM] and IN032 [RESPDOBD] at top of screen.

DATA CHECK: If the birth year differs with the birth year entered in IN007, please display 'BIRTH YEAR DOES NOT MATCH WHAT WAS REPORTED IN PRIOR ROUND. PLEASE CONFIRM.'

[What is your birth date?]
Answer must be in the range from 1901 up to 1990
       |__|__|__|__|
       ENTER FOUR DIGIT YEAR OF BIRTH.

       REFUSED...RF
       DON'T KNOW..DK

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│                         IN033ABX                             │
│   IF ANY PART OF THE DATE OF BIRTH IS MISSING, THEN GO TO     │
│                   IN033B [RESPAGE].                           │
│               ELSE, GO TO IN033BX.                           │
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IN033b.

RESPAGE   How old are you?
Answer must be in the range from 14 up to 100
                           |__|__|__|
                           ENTER AGE

                    REFUSED..RF
                    DON'T KNOW..DK

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│                        IN033BX                               │
│   IF IN007 [RROSTNUM] = 0 (NEW RESPONDENT DID NOT LIVE IN     │
│       THE HOUSEHOLD AT PRESCHOOL) THEN GO TO IN034            │
│                       [RGENDER].                             │
│                                                              │
│   ELSE IF IN007 [RROSTNUM] ^= 0 (RESPONDENT LIVED IN THE     │
│     HOUSEHOLD AT PRESCHOOL) AND THE RESPONDENT WAS           │
│     GIRLFRIEND OR PARTNER OF CHILD'S PARENT/GUARDIAN         │
│   (PRESCHOOL IN035 [RESPRELC] = 5), BOYFRIEND OR PARTNER     │
│ OF CHILD'S PARENT/GUARDIAN (PRESCHOOL IN035 [RESPRELC] =     │
│   6), OTHER NON-RELATIVE (PRESCHOOL IN035 [RESPRELC] = 13),  │
│      CHILD'S STEPMOTHER (PRESCHOOL IN040 [TYPEMOM] = 3),     │
│     FOSTER MOTHER OR FEMALE GUARDIAN (PRESCHOOL IN040        │
│ [TYPEMOM] = 4), STEPFATHER (PRESCHOOL IN045 [DADTYPE] = 3),  │
│    OR FOSTER FATHER OR MALE GUARDIAN (PRESCHOOL IN045        │
│   [DADTYPE] = 4) AND IN019 [RRELSAME] =NO (THE RELATIONSHIP  │
│       IS NOT THE SAME AS AT PRESCHOOL) THEN GO TO IN035      │
│                       [RESPRELC].                           │
│                                                              │
│   ELSE IF IN007 [RROSTNUM] ^= 0 (RESPONDENT LIVED IN THE     │
│       HOUSEHOLD AT 2-YEARS) THEN GO TO IN062BX.             │
│                                                              │
│                                                              │
│                                                              │
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IN034.
RGENDER

CODE IF OBVIOUS. OTHERWISE, ASK: Are you male or female?

ENTER GENDER OF RESPONDENT.

MALE..1
FEMALE..2
REFUSED...RF
DON'T KNOW...DK

IN035.   What is your relationship to {CHILD} {and {TWIN}}?
RESPRELC

MOTHER/FEMALE GUARDIAN...(IN040)
FATHER/MALE GUARDIAN……………………………………………(IN045, DADTYPE)
SISTER……………………………………………………………………..(IN050, TYPESIS)
BROTHER……………………………………………………................(IN055, TYPEBRO)
GIRLFRIEND OR PARTNER OF CHILD'S PARENT/GUARDIAN..................(IN062BX)
BOYFRIEND OR PARTNER OF CHILD'S PARENT/GUARDIAN..................(IN062BX)
GRANDMOTHER ....(IN062BX)
GRANDFATHER...(IN062BX)
AUNT...(IN062BX)
UNCLE...(IN062BX)
COUSIN..(IN062BX)
OTHER RELATIVE..(IN062BX)
OTHER NON-RELATIVE……………………………………………(IN060, TYPENREL)
REFUSED...…….RF
DON'T KNOW..DK

IN040.   Are you {CHILD}'s {and {TWIN}}'s...
TYPEMOM

Birth mother, ...(IN062BX)
Adoptive mother,.......................................(IN062BX)
Stepmother, or..(IN062BX)
Foster mother or female guardian?............(IN062BX)
REFUSED...RF
DON'T KNOW..DK

IN045.   Are you {CHILD}'s {and {TWIN}}'s...
DADTYPE

Birth father,...(IN062BX)

Adoptive father,...(IN062BX)
        Stepfather, or..(IN062BX)
        Foster father or male guardian?................(IN062BX)
        REFUSED..RF
        DON'T KNOW..DK

                                                                        HELP AVAILABLE

IN050.   Are you {CHILD}'s {and {TWIN}}'s...
TYPESIS

                Full sister,..(IN062BX)
                Half sister,...(IN062BX)
                Stepsister,...(IN062BX)
                Adoptive sister, or.....................................(IN062BX)
                Foster sister?..(IN062BX)
                REFUSED..RF
                DON'T KNOW..DK

                                                                        HELP AVAILABLE

IN055.   Are you {CHILD}'s {and {TWIN}}'s …
TYPEBRO

                Full brother,...(IN062BX)
                Half brother,..(IN062BX)
                Stepbrother,...(IN062BX)
                Adoptive brother, or...................................(IN062BX)
                Foster brother?..(IN062BX)
                REFUSED..RF
                DON'T KNOW..DK

                                                                        HELP AVAILABLE

IN060.   CODE NON-RELATIVE RELATIONSHIP BELOW IF MORE DESCRIPTIVE.
TYPENREL
                1   GIRLFRIEND OR PARTNER OF CHILD'S PARENT/GUARDIAN
                2   BOYFRIEND OR PARTNER OF CHILD'S PARENT/GUARDIAN
                3   FEMALE GUARDIAN
                4   MALE GUARDIAN
                5   DAUGHTER/SON OF CHILD'S PARENT'S PARTNER
                6   OTHER RELATIVE OF CHILD'S PARENT'S PARTNER
                91   OTHER NON-RELATIVE
                REFUSED..RF
                DON'T KNOW..DK

+---+
| IN062BX |
| IF CURRENT RESPONDENT IS NOT THE BIRTH MOTHER AND THE |
| BIOLOGICAL MOTHER WAS IN THE HOUSEHOLD AT K '06, THEN |
| GO TO IN065 [STBIOMOM]. |
+---+

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│              ELSE, GO TO IN115 [CNAMCORR].                            │
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IN065
STBIOMOM

DISPLAY INSTRUCTIONS:
If Middle Name is 'NMN' then do not display middle name.

{FULL NAME BIRTH MOTHER FROM PRELOAD} HAS NOT BEEN IDENTIFIED AS THE
PARENT RESPONDENT.

Where is {CHILD}{and {TWIN}}'s birth mother living?

LIVING ELSEWHERE...(IN115) [CNAMCORR]
DECEASED...(IN115) [CNAMCORR]
LIVING IN HOUSEHOLD BUT UNAVAILABLE............................(IN068PRE)
UNKNOWN..(IN115) [CNAMCORR]
ENTER OTHER (SPECIFY) [*Where is the birth mother living?]*
REFUSED..RF
DON'T KNOW...DK

IN066.   [Where is {CHILD}{and {TWIN}}'s mother living?]
STBIOMOS

SPECIFY OTHER STATUS OF {CHILD}{AND {TWIN}}'S BIRTH MOTHER.

IN068PRE.   YOU HAVE RECORDED THAT {CHILD}{AND {TWIN}}'S BIRTH MOTHER IS IN THE
HOUSEHOLD, BUT UNAVAILABLE.

PLEASE CONFIRM THAT THE {CHILD}{AND {TWIN}}'S BIRTH MOTHER IS
UNAVAILABLE FOR THE
INTERVIEW FOR A NON-TEMPORARY REASON.

IF {CHILD}{AND {TWIN}}'S BIRTH MOTHER IS UNAVAILABLE FOR A TEMPORARY
REASON, PLEASE PRESS "ALT-X" TO BREAK OFF NOW AND RESCHEDULE THE
INTERVIEW FOR A TIME WHEN SHE IS AVAILABLE.

IN115.
CNAMCORR

DISPLAY INSTRUCTIONS:
Display Child's/Twin's full name from K '06 interview. If Middle Name is 'NMN' then do not display
middle name.

I have recorded {CHILD'S/TWIN'S FULL NAME} as {CHILD/TWIN}'s full name. Is this still
correct?

ALSO VERIFY SPELLING.

NMN MEANS NO MIDDLE NAME.

1   YES   (GO TO IN130a)
2   NO
      REFUSED   (CASE INFORMATION REVIEW SCREEN)

IN120.
CHFNAME

DISPLAY INSTRUCTIONS:
Display Child's/Twin's full name from K '06 interview. If Middle Name is 'NMN' then do not display middle name.

[I have recorded {CHILD'S/TWIN'S FULL NAME} as {CHILD/TWIN}'s full name. Is this still correct?]

ALSO VERIFY SPELLING.

MAKE CORRECTIONS TO FIRST NAME BELOW OR PRESS ENTER TO ACCEPT FIRST NAME.

IN125.
CHMNAME
DISPLAY INSTRUCTIONS:
Display Child's/Twin's full name from K '06 interview. If Middle Name is 'NMN' then do not display middle name.

[I have recorded {CHILD'S/TWIN'S FULL NAME} as {CHILD/TWIN}'s full name. Is this still correct?]

ALSO VERIFY SPELLING.

MAKE CORRECTIONS TO MIDDLE NAME BELOW OR PRESS ENTER TO ACCEPT MIDDLE NAME.

IF NO MIDDLE NAME OR INITIAL, ENTER 'NMN'.

IN130.
CHLNAME

DISPLAY INSTRUCTIONS:
Display Child's/Twin's full name from K '06 interview. If Middle Name is 'NMN' then do not display middle name.

[I have recorded {CHILD'S/TWIN'S FULL NAME} as {CHILD/TWIN}'s full name. Is this still correct?]

ALSO VERIFY SPELLING.

MAKE CORRECTIONS TO LAST NAME BELOW OR PRESS ENTER TO ACCEPT LAST NAME.

IN130a.   Do you call {CHILD/TWIN} by {his/her} first name, or is there some other name that you use?

HASNICK

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USE {FIRST NAME}.........................................1(FINISHIN)
USE SOME OTHER NAME.............................................2
REFUSED.....................................................RF (FINISHIN)
DON'T KNOW...............................................DK (FINISHIN)
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IN130b.   What is that other name?
NICKNAME

String length equals 30.
CONFIRM SPELLING.

```
REFUSED.....................................................................RF
DON'T KNOW................................................................DK
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DISPLAY INSTRUCTIONS: If IN140 (NICKCH) is not empty, use it for fills throughout.

FinishIN

CASE {CASEID}   CASE INFORMATION REVIEW SCREEN

ONCE YOU PASS THIS SCREEN, YOU WILL NOT BE ABLE TO RETURN TO SECTION IN.

CHILD: {CHILD'S FULL NAME}

CHILD'S DATE OF BIRTH: {CHILD'S DOB}

STATUS OF CHILD: {CHILD'S STATUS}

RESPONDENT: {RESPONDENT'S FULL NAME}

RESPONDENT RELATION TO CHILD: {RESPONDENT'S RELATION TO CHILD}

{TWIN:}   {TWIN'S FULL NAME}

{TWIN'S GENDER:}   {TWIN'S SEX}

{STATUS OF TWIN:}   {IN010/IN012}

{TWIN'S DATE OF BIRTH}   {TWIN'S DOB}

IF THIS INFORMATION IS NOT CORRECT, PLEASE BACK UP AND CORRECT RESPONSES IN
SECTION IN.

NOTES: DATE OF BIRTH WAS VERIFIED IN PRIOR INTERVIEWS. IF THE RESPONDENT IS
ALREADY IN THE HOUSEHOLD, YOU CANNOT CORRECT THE NAME IN THIS SECTION, BUT YOU
CAN LATER IN SECTION LF.

IF THIS INFORMATION IS CORRECT, PLEASE PRESS '1' TO CONTINUE.

Verify

CASE {CASEID}   CASE INFORMATION REVIEW SCREEN

YOU HAVE RE-ENTERED CASE {CASEID}

CHILD: {CHILD'S FULL NAME}

CHILD'S GENDER: {CHILD'S SEX}

CHILD'S DATE OF BIRTH: {CHILD'S DOB}

RESPONDENT: {RESPONDENT'S FULL NAME}

RESPONDENT RELATION TO CHILD: {RESPONDENT'S RELATION TO CHILD}

{TWIN:}   {TWIN'S FULL NAME}

{TWIN'S GENDER:}   {TWIN'S SEX}

{STATUS OF TWIN:}   {IN010/IN012} [TWININHH/TWINLIVE]

{TWIN'S DATE OF BIRTH}   {TWIN'S DOB}

{DATE OF K '06 INTERVIEW:}   {K '06 DATE}

GO TO SECTION 2-FS.

Section 2-FS: FAMILY STRUCTURE

FS001.   CODE IF OBVIOUS. OTHERWISE ASK:

              Is {CHILD/TWIN} male or female?

              ENTER GENDER OF {CHILD/TWIN}

                    MALE...1
                    FEMALE...2
                    REFUSED..RF
                    DON'T KNOW...DK

If new respondent did not appear on previous (9-month or 2-year or preschool or K '06) rosters, display "you and".

FS005   Now, I have a few questions about {you and} your household.

ECLS-K   I am going to read a list of the people who lived in <u>this</u> household at the time of our last interview. As I read each person's name, please tell me if he or she <u>still</u> lives in this household.

STILLHERE
              Does {FULL NAME} <u>still</u> live in this household?

NOTE: NAME IS USED FOR COMMUNICATIONS BETWEEN FI AND RESPONDENT. NO NEED TO CORRECT THE ROSTER. AGE IS APPROXIMATE.

DISPLAY INSTRUCTIONS:
Display name, age, gender, and person type of all household members from 9-month/2-year/preschool/K '06 interview. This information should be protected so that it cannot be changed.

Display, but do not ask FS005 [STILLHERE] for the current respondent (if on the 9-month/2-year/preschool/K '06 roster), CHILD, TWIN (if on 9-month/2-year/preschool/K '06 roster), child's biological mother (if on 9-month/2-year/preschool/K '06 roster).

Display brackets [ ] around the first paragraph when the cursor is in the "STILL IN HH" column for any household member other than the first person to be asked about.

                    YES..1
                    NO..2
                    REFUSED..RF
                    DON'T KNOW...DK

+---+
| **FS009BX** |
| IF YES, DK, or RF FOR ALL IN MATRIX, GO TO FS015 [FNAME]. |
+---+

FS010.   Why is {FIRST NAME} no longer living in this household?
WHYNOTHH

          MARRIAGE OR REMARRIAGE..1
          SEPARATION OR DIVORCE...2
          ATTENDING COLLEGE OR BOARDING SCHOOL............3
          LIVING ELSEWHERE FOR EMPLOYMENT-
            RELATED REASONS...4
          LIVING ELSEWHERE FOR OTHER REASONS................5
          DECEASED...6
          IN JAIL OR PRISON..7
          ENTER OTHER (SPECIFY) [*Why is {FIRST NAME} no longer living in this household?*]..91
          REFUSED..RF
          DON'T KNOW...DK

FS012.   [Why is {FIRST NAME} no longer living in this household?]
WHYNOTOS   **String length is equal to 40**

ENTER OTHER REASON (SPECIFY)
[Why is { FIRST NAME} no longer living in this household?]

FS015.   [{We have listed that you and {CHILD}{and {TWIN}}{and {CHILD}'s {and
ECLS-K   {TWIN}'s} mother} currently live in this household.}

Please tell me the names and ages of all the people who normally live here.

Please do not include anyone staying here temporarily who usually lives somewhere else.

PROBE: Anyone else (living in this household)? {[People sometimes join households as a result of marriage, or a marriage-like partner or a relative or boarder moving in.]}

FNAME

ENTER FIRST NAME OF HOUSEHOLD MEMBER OR
PRESS ENTER IF {NO ONE NEW} OR HOUSEHOLD ROSTER IS COMPLETE.
        BLANK…………………….(WHICHB4BX) [MATRIXCOMPLETE]
        REFUSED.............RF(WHICHB4BX) [MATRIXCOMPLETE]
        DON'T KNOW.......DK(WHICHB4BX) [MATRIXCOMPLETE]

FS017.   ENTER MIDDLE NAME OF {NAME}.
ECLS-K

IF NO MIDDLE NAME OR INITIAL, ENTER 'NMN'.
        REFUSED...RF
        DON'T KNOW...DK
MNAME

FS020.   ENTER LAST NAME OF {NAME}.
        REFUSED...RF
        DON'T KNOW...DK
ECLS-K
LNAME

HereB4   Has {FName} lived in {CHILD AND TWIN}'S household before?

                        YES……………………………………………………………1 [FS015]
                        NO……………………………………………………………2
                        REFUSED..RF
                        DON'T KNOW……………………………………………DK

FS025.   How old {are you/is {NAME}}?

              Answer must be in the range from 0 up to 120

              DISPLAY INSTRUCTIONS:
              Display this question when cursor is positioned in age column of household matrix.
              Display "are you" when the cursor is positioned in age column for new respondent's row and "is {NAME}" (display appropriate first name) when cursor is positioned in age column for someone other than respondent's row.

ECLS-K

              ENTER AGE OF {NAME}.

AGE

              ENTER ZERO IF PERSON'S AGE IS LESS THAN ONE YEAR.
                     REFUSED..RF
                     DON'T KNOW..DK

FS027.   Is {NAME} male or female?

              DISPLAY INSTRUCTIONS:
              Display this question when cursor is positioned in gender column.
              Display first name of person where cursor is position for {NAME}.

ECLS-K

              CODE IF OBVIOUS. OTHERWISE, ASK: Is [NAME] male or female?

              ENTER GENDER OF {NAME}.

GENDER

                        MALE...1
                        FEMALE..2
                        REFUSED..RF
                        DON'T KNOW..DK

FS028.   When did {NAME} join the household?
ENTHHM/ENTHHY

                    Month answer must be in range from 1 to 12.
                    Year answer must be in range from 2002 to 2005.
                    Interviewer may override range from 1905 to 2005.

                    ENTER MONTH: |__|__| ENTER YEAR: |__|__|__|__|
                    REFUSED...RF
                    DON'T KNOW..DK

WhichB4BX

FOR EACH PERSON WITH HereB4=YES (1): IF NUMBER OF PERSONS IN THE ROSTER WHO LEFT
THE HOUSEHILD IN PRIOR ROUNDS AND DID NOT RETURN THIS ROUND IS>0, GO TO WhichB4.
ELSE, ASK AGE (FS025), GENDER (FS027), EntHHM/EntHHY (FS028).

WhichB4   Is [FNAME LNAME] the same as any of the people listed?

IF NOT THE SAME, ENTER 0.

[LIST NAME AND AGE OF ALL PERSONS WHO LEFT THE HOUSEHOLD IN PRIOR ROUND AND DID
NOT RETURN THIS ROUND.]

IF WHICHB4=0, ASK AGE (FS025), GENDER (FS027), EntHHm/EntHHY (FS028).

ConfirmB4
          "YOU HAVE INDICATE THAT THESE ARE THE SAME PEOPLE. PLEASE CONFIRM. IF
THESE ARE NOT THE SAME PEOPLE, BACKUP TO THE PREVIOUS QUESTION AND CHANGE
YOUR RESPONSE.
          [NAME1: DISPLAY THE NAME CHOSEN IN WHICHB4]
          [NAME2: DISPLAY THE NAME ASSOCIATED WITH HEREB4 = 1]

          99 = "YES, [Fill NAME 1] IS [Fill NAME2]

FS034.   IS HOUSEHOLD ROSTER COMPLETE?
MATRIXCOMPLETE

YOU HAVE INDICATED THAT THESE PEOPLE ARE LIVING IN THE HOUSEHOLD.

                    YES.. 1
                    NO.. 2   (FS015
                    MATRIX)

FS035.   Have we missed anyone who usually lives here who is temporarily away from home or
ECLS-K   living in a dorm at school, or any babies or small children?
MISSANY

```
                    YES........................................................1   (MATRIX FS015)[FNAME]
                    NO..........................................................2
                    REFUSED............................................RF
                    DON'T KNOW.....................................DK
```

FS037.   Do you have a spouse or partner who lives in this household?
SPOUSE
ECLS-K

```
                    YES........................................................1
                    NO..........................................................2   (FS039BX)
                    REFUSED............................................RF   (FS039BX)
                    DON'T KNOW.....................................DK   (FS039BX)
```

| **FS038BX** |
| If no adults (age 18 or older) other than respondent in HH, skip to FS039BX. |
| Else go to FS038. |

FS038.   Who in the household is your spouse or partner?
ECLS-K

DISPLAY INSTRUCTIONS:
Display household members 14 years or older who are not the respondent as response category choices. Do not display household members no longer living in the household. ENTER NUMBER NEXT TO NAME OF PERSON WHO IS {RESPONDENT}'S SPOUSE/PARTNER.

WSSPOUS

IF NAME NOT LISTED, BACK UP AND ADD PERSON (IF PART OF HOUSEHOLD).

SPOUSE/PARTNER IDENTIFIED AT PREVIOUS INTERVIEW IS FLAGGED WITH [S] TO THE LEFT OF THEIR NAME.

| **FS039BX** |
| |
| If current respondent is the same as K '06 respondent, and PRESCHOOL respondent had a spouse/partner whose relationship was GIRLFRIEND OR PARTNER OF CHILD'S PARENT/GUARDIAN (K '06 FS040 [RELATE] = 5); BOYFRIEND OR PARTNER OF CHILD'S PARENT/GUARDIAN (K '06 FS040 [RELATE] = 6); OTHER NON-RELATIVE (K '06 FS040 [RELATE] = 13); CHILD'S STEPMOTHER (K '06 FS045 [MOMSP] = 3); FOSTER MOTHER OR FEMALE GUARDIAN (K '06 FS045 [MOMSP] = 4); STEPFATHER (K '06 FS050 [DADSP] = 3); OR FOSTER FATHER OR MALE GUARDIAN (K '06 FS050 [DADSP] = 4), ask FS040-FS065 [RELATE, MOMSP, DADSP, SISSP, BROSP, NRELSP] of the spouse/partner. |
| |
| Also ask FS040-FS065 [RELATE, MOMSP, DADSP, SISSP, BROSP, NRELSP] for each person added to household matrix in this round who is not focal child, twin, respondent or birth mother. |
| |
| ELSE go to FS069BX |

FS040.   What is {NAME}'s relationship to {CHILD}{ and {TWIN}}?
ECLS-K
RELATE

MOTHER/FEMALE GUARDIAN.............	1	(FS045) [MOMSP]
FATHER/MALE GUARDIAN...................	2	(FS050) [DADSP]
SISTER..	3	(FS055) [SISSP]
BROTHER...	4	(FS060) [BROSP]
GIRLFRIEND OR PARTNER OF	}	
(CHILD)'S PARENT/GUARDIAN..........	5	
BOYFRIEND OR PARTNER OF		
(CHILD)'S PARENT/GUARDIAN..........	6	
GRANDMOTHER.................................	7	
GRANDFATHER..................................	8	(FS068BX)
AUNT..	9	
UNCLE...	10	
COUSIN...	11	
OTHER RELATIVE...............................	12	
OTHER NON-RELATIVE.......................	13	(FS065) [NRELSP]
REFUSED..RF		(FS068BX)
DON'T KNOW.......................................DK		(FS068BX)

FS045.   Is {NAME} {CHILD}'s {and {TWIN}}'s…
ECLS-K
MOMSP

Birth mother,...1	(FS068BX)
Adoptive mother,...2	(FS068BX)
Stepmother, or..3	(FS068BX)
Foster mother or female guardian?.....................................4	(FS068BX)
REFUSED..RF	(FS068BX)
DON'T KNOW..DK	(FS068BX)

FS050.   Is {NAME} {CHILD}'s {and {TWIN}}'s…
ECLS-K
DADSP

Birth father,...1	(FS068BX)
Adoptive father,...2	(FS068BX)
Step father, or..3	(FS068BX)
Foster father or male guardian?...4	(FS068BX)
REFUSED..RF	(FS068BX)
DON'T KNOW..DK	(FS068BX)

FS055.   Is {NAME} {CHILD}'s {and {TWIN}}'s…
ECLS-K
SISSP

      Full sister,..1 (FS068BX)
      Half sister,...2 (FS068BX)
      Step sister,..3 (FS068BX)
      Adoptive sister, or...4 (FS068BX)
      Foster sister?..5 (FS068BX)
      REFUSED...RF (FS068BX)
      DON'T KNOW..DK (FS068BX)

FS060.   Is {NAME} {CHILD}'s {and {TWIN}}'s…
ECLS-K
BROSP

      Full brother,...1 (FS068BX)
      Half brother,..2 (FS068BX)
      Step brother,...3 (FS068BX)
      Adoptive brother, or...4 (FS068BX)
      Foster brother?..5 (FS068BX)
      REFUSED...RF (FS068BX)
      DON'T KNOW..DK (FS068BX)

FS065.   CODE NON-RELATIVE RELATIONSHIP BELOW IF MORE DESCRIPTIVE.
ECLS-K
NRELSP

      GIRLFRIEND OR PARTNER OF
        (CHILD)'S PARENT/GUARDIAN.....................................1
      BOYFRIEND OR PARTNER OF
        (CHILD)'S PARENT/GUARDIAN.....................................2
      FEMALE GUARDIAN...3
      MALE GUARDIAN..4
      DAUGHTER/SON OF (CHILD)'S
        PARENT'S PARTNER..5
      OTHER RELATIVE OF (CHILD)'S
        PARENT'S PARTNER..6
      ENTER OTHER NON-RELATIVE................................... 91
        (Specify) [*What is the non-relative relationship?*]_____
      REFUSED...RF
      DON'T KNOW..DK

FS070.

NODADHH

I have recorded that {CHILD}{and {TWIN}}'s biological father is not living in this household. Is that correct?

YES...1
NO..2 (FS015) [FNAME]
REFUSED..RF (FS074BX)
DON'T KNOW...DK (FS074BX)

HELP AVAILABLE

FS075.
CENSUS
HISPAN

{Are you/Is {NAME}} of Spanish, Hispanic, or Latino origin?

YES...1
NO..2 (FS085) [PRACE]
REFUSED ....RF (FS085) [PRACE]
DON'T KNOW ....DK (FS085) [PRACE]

FS080.   Which one or more of these groups {are you/is {NAME}}...
TYPHIS
                CODE ALL THAT APPLY

                SHOW CARD FS-1

                Mexican, Mexican American, Chicano,................................1
                Puerto Rican,..2
                Cuban, or...3
                Enter Another Spanish/Hispanic/Latino group..................91
                   (Specify) *[Which group do you belong to?]*_____
                REFUSED...RF
                DON'T KNOW..DK

                                                                HELP AVAILABLE
FS085.   What is {your/{NAME} 's} race?
CENSUS   CODE ALL THAT APPLY
PRACE   **SHOW CARD FS - 2**

                WHITE...1 (SECTION 3-SE)
                BLACK OR AFRICAN AMERICAN......................................2 (SECTION 3-SE)
                ENTER AMERICAN INDIAN OR ALASKA NATIVE.............3 (FS086d)
                   (Specify) [*Are you American Indian or Alaska Native]*_____
                ....
                ASIAN INDIAN..4 (SECTION 3-SE)
                CHINESE...5 (SECTION 3-SE)
                FILIPINO..6 (SECTION 3-SE)
                JAPANESE...7 (SECTION 3-SE)
                KOREAN...8 (SECTION 3-SE)
                VIETNAMESE...9 (SECTION 3-SE)
                ENTER OTHER ASIAN...10 (SECTION 3-SE)
                (Specify) [*Which Asian race are you?]*_____
                NATIVE HAWAIIAN...11 (SECTION 3-SE)
                GUAMANIAN OR CHAMORRO.......................................12 (SECTION 3-SE)
                SAMOAN...13 (SECTION 3-SE)
                ENTER OTHER PACIFIC ISLANDER..............................14 (SECTION 3-SE)
                (Specify) [*Which Pacific Islander race are you?]*_____
                ENTER ANOTHER RACE..91 (SECTION 3-SE)
                (Specify) *[ENTER OTHER RACE]*_____
                REFUSED...RF (SECTION 3-SE)
                DON'T KNOW……………………………………………………DK   (SECTION 3-SE)

+---+
| **FS086BX** |
| FOR CHILD: IF FS085 IN K06=1 (CHILD WAS AMERICAN |
| INDIAN/ALASKAN NATIVE AT K06) AND K06 FS086A IS RF, DK OR |
| BLANK, GO TO FS086A. |
| ELSE, GO TO SECTION 3-SE. |
+---+

FS086a.
DISPLAY INSTRUCTIONS:
            Display specific Indian affiliation recorded in 9-month FS086. If no text listed or if reported
            as "don't know" or "unknown" or "refused" display "of an unknown American Indian or
            Alaska native background".

            During our last interview, {CHILD's} race was reported as American Indian or Alaska
            Native. We have recorded that {CHILD is} {{9-MONTH FS086 TEXT}/of an unknown
            American Indian or Alaska native background}. Is this information correct?
AMERIND
                    YES...1(FS086d, TRIBENROL)
                    NO..2(FS086b, TYPAMERIND)
                    REFUSED..RF (SECTION 3-SE)
                    DON'T KNOW.....................................DK (SECTION 3-SE)

FS086b.

            What is {CHILD's} race?
TYPAMERIND
                    ENTER AMERICAN INDIAN OR ALASKA NATIVE (SPECIFY)
                    [*Are you American Indian or Alaska Native?*]……………….1(FS086c)
                    [TYPAMINOS]
                    OTHER RACE..2 (SECTION 3-SE)
                    REFUSED...RF (SECTION 3-SE)
                    DON'T KNOW ....DK (SECTION 3-SE)

FS086c.   [What is {your/{NAME} 's} race?]
TYPAMINOS
                SPECIFY AMERICAN INDIAN TRIBE/ALASKA REGIONAL CORPORATION.

FS086d.
DISPLAY INSTRUCTIONS:
Display "Are you" if respondent. Else display "Is {NAME}".
INTERVIEWER: USE EITHER "TRIBE" OR "ALASKA REGIONAL CORPORATION" IN QUESTION
BELOW DEPENDING ON PREVIOUS RESPONSES.

TRIBENROL
            {Are you/Is {NAME}} formally enrolled in that (tribe/Alaska Regional Corporation)?

                    YES..1
                    NO...2
                    REFUSED...RF
                    DON'T KNOW..DK

FS086e.
DISPLAY INSTRUCTIONS:
Display "Do you" if respondent. Else display "Does {NAME}".

TRIBELND
{Do you/Does {NAME}} currently live on tribal lands or a reservation?

YES..1
NO..2
REFUSED...RF
DON'T KNOW...DK

```
                          FS089BX
NOTE, AFTER LAST PERSON DISPLAYED HAS BEEN ASKED FS075-
    FS086 [HISPAN, TYPHIS, PRACE, AMERIND, TYPAMERIND,
TYPAMINOS, TRIBENROL, TRIBELND] CHECK TO MAKE SURE NO
    INFORMATION IS MISSING. IF ANY INFORMATION IS MISSING,
    DISPLAY ERROR MESSAGE TO GO BACK AND FILL IN MISSING
                           INFORMATION.
      IF NO INFORMATION IS MISSING, GO TO FS174BX.
```

```
                          FS174BX
CHECK HOUSEHOLD MATRIX. IF ANOTHER PERSON IN MATRIX
       REQUIRING THE COLLECTION OF RACE/ETHNICITY
   INFORMATION, GO TO FS075 [HISPAN] FOR NEXT PERSON.
```

GO TO SECTION 3-SE.

Section 3-SE: SCHOOL EXPERIENCES

SEIntro

Now I'm going to ask you questions about {CHILD/TWIN}'s school experiences.

ENER '1' TO CONTINUE

```
┌────────────────────────────────────────────────────────────────┐
│                          SE005BX                               │
│                                                                │
│            IF ASKING ABOUT CHILD, GO TO SE010BX.               │
│                                                                │
│        IF ASKING ABOUT TWIN AND CHILD NOWSCHL = 1,             │
│                       GO TO SE005.                             │
│                                                                │
│        IF ASKING ABOUT TWIN AND CHILD NOWSCHL NE 1,            │
│                       GO TO SE010BX.                           │
│                                                                │
└────────────────────────────────────────────────────────────────┘
```

SE005.
TWINSCHL   Does {TWIN} attend the same school as {CHILD}?

> YES...1
> NO..2
> REFUSED..RF
> DON'T KNOW...DK

```
┌────────────────────────────────────────────────────────────────┐
│                          SE010BX                               │
│          IF ASKING ABOUT CHILD, GO TO SE010 [NOWSCHL].         │
│                                                                │
│     IF ASKING ABOUT TWIN AND SE005 [TWINSCHL] = 1, SKIP TO     │
│                      SE030 [GRADELVL].                         │
│                ELSE ASK SE010 [NOWSCHL].                       │
│                                                                │
└────────────────────────────────────────────────────────────────┘
```

SE010.   [ALL RESPONDENTS]
                Is {CHILD/TWIN} attending or enrolled in school?
NOWSCHL

> YES...1
> NO..2
> REFUSED..RF
> DON'T KNOW...DK

SE015.   [ALL RESPONDENTS]
HOMESCHL   Some parents decide to educate their children at home rather than send them to school. Is
                {CHILD/TWIN} being schooled at home?

> YES...1
> NO..2
> REFUSED..RF
> DON'T KNOW...DK

NHES 2003

SE020.   [HOME SCHOOLERS]
HMSCLALL   Is {CHILD/TWIN} getting all of {his/her} instruction at home, or is {he/she} getting some at school and some at home?

> ALL AT HOME..1 (SE030)
> SOME AT SCHOOL AND SOME AT HOME.......................2
> REFUSED...RF (SE030)
> DON'T KNOW..DK (SE030)

NHES 2003

SE025.   [HOME SCHOOLERS, WHO GO TO A SCHOOL BUILDING AS WELL]
HRSSCHL   How many <u>hours</u> each <u>week</u> does {CHILD/TWIN} usually go to a school for instruction? Please do not include time spent in extracurricular activities.

> |__|__|
> ENTER NUMBER OF HOURS

> Answer must be in range from 1 up to 30.

> REFUSED...RF
> DON'T KNOW..DK

HELP AVAILABLE

SE030.   [ALL RESPONDENTS ENROLLED IN SCHOOL OR HOME SCHOOLED]
              What grade is {he/she} in?
GRADELVL

> PRESCHOOL...1 (SE033BX)
> KINDERGARTEN..2 (SE033BX)
> FIRST GRADE..3 (SE033BX)
> SECOND GRADE...4 (SE033BX)
> UNGRADED...5 (SE033BX)
> OTHER, SPECIFY...6
> REFUSED...RF (SE033BX)
> DON'T KNOW...DK (SE033BX)

SE030OS.   [What grade is {he/she} in?]
GRADELVLOS

> OTHER GRADE LEVEL CHILD IS IN

> _____

> REFUSED...RF
> DON'T KNOW..DK

SE032.   [FOLLOW-UP TO OTHER SPECIFY FOR SE030]
                Would you say that program is most similar to a preschool/prekindergarten type of program or
                to a kindergarten program? Please keep in mind that most kindergarten programs for this
                school year require children to be age 5 by September 1st, 2006.
GRADE2

                        PRESCHOOL/PREKINDERGARTEN..................................1
                        KINDERGARTEN..2
                        NEITHER..3
                        REFUSED...RF
                        DON'T KNOW..DK

SE033BX

IF (CHILD'S GRADE AT K06 **AND** CHILD'S GRADE AT K07) = 2 (CHILD IN KINDERGARTEN BOTH
ROUNDS), SET REPEATER = 1 (CHILD IS A KINDERGARTEN REPEATER). ELSE REPEATER = 0
(CHILD IS NOT A KINDERGARTEN REPEATER).

IF REPEATER = 1, GO TO SE033. ELSE, GO TO SE035BX.

SE033. [REPEATERS]

                I wanted to confirm information I have recorded. I have that {CHILD/TWIN} was in
                kindergarten last year, and you are indicating that {CHILD/TWIN} is in kindergarten this year
                as well. Is that correct?
CONREPEAT
                        YES, CHILD IN KINDERGARTEN LAST YEAR **AND**
                            THIS YEAR……………………….......................................1 GO TO SE034a
                        NO, {CHILD/TWIN} NOT IN KINDERGARTEN
                        LAST YEAR 2
                        NO, {CHILD/TWIN} NOT IN KINDERGARTEN
                        THIS YEAR...3
                        REFUSED...RF GO TO SE035BX
                      DON'T KNOW.....................................DK GO TO SE035BX

            IF CONREPEAT = 2, DISPLAY:

            YOU HAVE ENTERED THAT {CHILD/TWIN} WAS NOT IN KINDERGARTEN **LAST** YEAR.
                    IF THIS IS CORRECT, PRESS 'S' TO CONTINUE.
                    IF THIS IS INCORRECT, PRESS ENTER TO RETURN TO THE PREVIOUS
                    QUESTION.

            IF SE033 [CONREPEAT] = 2, RESET REPEATER TO 0.

IF CONREPEAT = 3, DISPLAY:

"YOU HAVE ENTERED THAT {CHILD/TWIN} IS IN KINDERGARTEN IN QUESTION GRADELVL (SE030) AND THAT {CHILD/TWIN} IS NOT IN KINDERGARTEN IN QUESTION CONREPEAT (SE033). THIS IS INCONSISTENT.

IF {CHILD/TWIN} IS **NOT** IN KINDERGARTEN **NOW**, SELECT (SE030) GRADELVL AND CORRECT.
IF {CHILD/TWIN} IS IN KINDERGARTEN **NOW**, SELECT (SE033) CONREPEAT BELOW AND CORRECT.

IF CHILD NOT A REPEATER, GO TO SE035BX.

SE034a.   [REPEATERS]
SUGREPEAT
               Who <u>first</u> suggested that {CHILD/TWIN} repeat kindergarten?

               {CHILD/TWIN}'S PARENTS/GUARDIANS   1 (GO TO SE034C)
               {CHILD/TWIN}'S TEACHER................................2 (GO TO SE034B)
               {HIS/HER} SCHOOL PRINCIPAL.......................3 (GO TO SE034B)
               {HIS/HER} GUIDANCE COUNSELOR……………4 (GO TO SE034B)
               {HIS/HER} SCHOOL PSYCHOLOGIST..............5 (GO TO SE034B)
               ANOTHER SCHOOL STAFF MEMBER..............6 (GO TO SE034B)
               SOMEONE ELSE...7 (GO TO SE034B)
                    (Specify_____)
               PARENT INDICATES CHILD NOT
                    REPEATING……………………………..95 (GO TO SE035BX)
               REFUSED...RF (GO TO SE034B)
               DON'T KNOW..DK (GO TO SE034B)

SE034b.   What was his or her reason for suggesting that {CHILD/TWIN} repeat kindergarten?

REAREPEAT
               HEALTH ISSUES...1
               SOCIAL DEVELOPMENT
                 (E.G. DOES NOT FOLLOW DIRECTIONS, DOES NOT SIT STILL,
                   DOES NOT PAY ATTENTION, ETC.).......................................2
               NOT READY ACADEMICALLY/
                 ACADEMIC DIFFICULTY...3
               PHYSICAL DEVELOPMENT
                 (COORDINATION, MOTOR SKILLS)..4
               SOMETHING ELSE...5
                    (Specify: _____)
               REFUSED..RF
               DON'T KNOW..DK

SE034c.   [REPEATERS]

Who <u>ultimately</u> decided that [CHILD/TWIN] would repeat kindergarten?

{CHILD/TWIN}'S PARENTS/GUARDIANS...........1 (GO TO SE034F)
{CHILD/TWIN}'S TEACHER..2
{HIS/HER} SCHOOL PRINCIPAL...3
{HIS/HER} GUIDANCE COUNSELOR………………………………4
{HIS/HER} SCHOOL PSYCHOLOGIST...5
ANOTHER SCHOOL STAFF MEMBER...6
SOMEONE ELSE..7
    (Specify_____)
REFUSED...RF
DON'T KNOW…………………………………………………   DK

SE034d.   [REPEATERS]

DECREPEAT

Do you feel you had a say in the decision for {CHILD/TWIN} to repeat kindergarten?

YES...1
NO...2
REFUSED..RF
DON'T KNOW...DK

SE034e.   [REPEATERS]

DECIAGREE

          Did you agree that {CHILD/TWIN} should repeat kindergarten?

                    YES...1
                    NO...2 (GO TO SE035BX)
                    REFUSED..RF
                    DON'T KNOW...DK

SE034f.[REPEATERS]

IMPTREPEAT
          What was your reason for repeating {CHILD/TWIN} in kindergarten?

          CODE ALL THAT APPLY.

          HEALTH ISSUES..1
          SOCIAL DEVELOPMENT
            (E.G. DOES S NOT FOLLOW DIRECTIONS, DOES NOT SIT STILL,
                DOES NOT PAY ATTENTION, ETC.).......................................2
          NOT READY ACADEMICALLY/
            ACADEMIC DIFFICULTY...3
          PHYSICAL DEVELOPMENT
            (COORDINATION, MOTOR SKILLS)..4
          RECOMMENDED BY SCHOOL...5
          SOMETHING ELSE...6
              (Specify: _____)
          REFUSED...RF
          DON'T KNOW..DK

┌──┐
│   **SE035BX**   │
│   │
│   IF ASKING ABOUT CHILD AND SE015 [HOMESCHL] = 1 OR SE030   │
│ [GRADELVL] = 1 OR SE032 [GRADE2] = 1, GO TO SE045 [ELIGKIND].   │
│   │
│   ELSE IF ASKING ABOUT CHILD, GO TO SE035 [PUBPRIV].   │
│   │
│   IF ASKING ABOUT TWIN AND SE005 [TWINSCHL] = 1,   │
│   SKIP TO SE040BX.   │
│   │
│   IF ASKING ABOUT TWIN AND SE030 [GRADELVL] = 1 OR SE032   │
│   [GRADE2] = 1 AND CHILD SE030 NE 1 AND SE032 NE 1, GO TO   │
│ SE045 [ELIGKIND]. ELSE IF BOTH CHILD AND TWIN SE030 = 1 OR   │
│   SE032 [GRADE2] = 1, GO TO SE050BX.   │
│ ELSE IF TWIN SE030 NE 1 AND SE032 = 3, ASK SE035 [PUBPRIV].   │
│   │
└──┘

SE035.   [ALL RESPONDENTS EXCEPT HOMESCHOOLERS AND CHILDREN NOT YET
              ENROLLED IN KINDERGARTEN]

Now I have a few questions about {CHILD/TWIN}'s school.

              Is {CHILD/TWIN}'S school public or private?

PUBPRIV

                    PUBLIC...1
                    PRIVATE...2
                    REFUSED...RF
                    DON'T KNOW..DK

┌───┐
│   **SE040BX**   │
│   │
│ IF ASKING ABOUT CHILD AND SE030 [GRADELVL] = 2, ASK SE040b-   │
│ c [KDAY]. ELSE GO TO SE055 [STARTSCL].   │
│   │
│ IF ASKING ABOUT TWIN AND SE030 [GRADELVL] = 2 FOR BOTH   │
│ CHILD AND TWIN **AND** SE005 [TWINSCHL] = 1, GO TO SE085aBX   │
│ [ACADPREP].   │
│   │
│ ELSE IF TWIN SE030 [GRADELVL] = 2, ASK SE040b-c [KDAY]. IF   │
│ TWIN SE030 = 1, GO TO SE045 [ELIGKIND]. ELSE GO TO SE055   │
│ [STARTSCL].   │
└───┘

SE040b.   [CHILDREN ENROLLED IN KINDERGARTEN]
KHRS
              How many <u>hours</u> each <u>day</u> does {he/she} spend in kindergarten?

              NUMBER OF HOURS PER DAY: _____

              Answer must be in range from 1 up to 7.
              Interviewer is allowed to override this range up to 10.

                    REFUSED...RF
                    DON'T KNOW..DK

SE040c.   [CHILDREN ENROLLED IN KINDERGARTEN]
KWEEK
              How many <u>days</u> each <u>week</u> does {he/she} spend in kindergarten?

              NUMBER OF DAYS PER WEEK: _____

              Answer must be in range from 1 up to 5.

                    REFUSED...RF
                    DON'T KNOW..DK

┌───┐
│   **SE045BX**   │
│   SKIP TO SE055 [STARTSCL].   │
└───┘

SE045.   [ONLY ASKED OF CHILDREN NOT YET ENROLLED IN KINDERGARTEN OR BEING
                HOME SCHOOLED]
ELIGKIND   Is {CHILD/TWIN} eligible, based on {his/her} age, to attend kindergarten in your district?

                YES...1
                NO..2 (SECTION CD)
                REFUSED..RF (SECTION CD)
                DON'T KNOW...DK (SECTION CD)

SE050BX

IF SE015 [HOMESCH] =1, GO TO SECTION CD.

SE050.   [ONLY ASKED OF CHILDREN NOT YET ENROLLED IN KINDERGARTEN AND NOT
                HOMESCHOOLED]
RSNOSEND   Why did you decide not to send {CHILD/TWIN} to kindergarten this year?
New   CODE ALL THAT APPLY

                CHILD NOT READY SOCIALLY (E.G., DOES NOT FOLLOW DIRECTIONS, CANNOT SIT
                        STILL, CANNOT PAY ATTENTION, ETC.).........................1
                CHILD NOT READY ACADEMICALLY (E.G., DOES NOT KNOW LETTERS/NUMBERS)
               2
                CHILD NOT READY, NO REASON GIVEN....................................3
                CHILD WOULD BE YOUNGEST IN CLASS..................................4
                PRESCHOOL PROGRAM BETTER...5
                OTHER...6
                REFUSED...RF
                DON'T KNOW..DK

SE055BX

IF HOMESCHOOLED, IN PRESCHOOL OR NOT ENROLLED[SE015
[HOMESCHL] = 1 OR SE030 [GRADELVL] = 1 OR SE010
[NOWSCHL] NE 1 OR SE032 [GRADE2] = 1], GO TO SECTION CD.
ELSE GO TO SE055 [STARTSCL].

IF ASKING ABOUT TWIN AND SE005=1 AND SE030 [GRADELVL] =
1, SKIP SE055 - SE080.

SE055.   [ALL RESPONDENTS EXCEPT HOMESCHOOLERS AND CHILDREN NOT YET
                ENROLLED IN KINDERGARTEN]

STARTSCL   About how many weeks has it been since {CHILD/TWIN} started school?

ENTER NUMBER OF WEEKS _____.
Answer must be in range from 0 up to 52.

REFUSED..RF
DON'T KNOW...DK

SE060BX
If SE005=1 [Twin attends the same school as child], GO TO SE075.
F SE035 [PUBPRIV] = 1, ASK SE060 – SE070 [PUBCHOIC].
IF SE035 [PUBPRIV] = 2, SKIP TO SE070a [PRIVOCHR].
ELSE, GO TO SE075 [SCLPRFMC].

SE060.   [ALL RESPONDENTS EXCEPT HOMESCHOOLERS AND CHILDREN NOT YET
ENROLLED IN KINDERGARTEN WHO ARE IN PUBLIC SCHOOL]

PUBCHOIC   Is the school {CHILD/TWIN} attends a regularly assigned school or a school that you chose?
NHES PFI 2003
mod for K, Arcia

ASSIGNED...1 (SE070 [PUBLIVE])
CHOSEN...2
ASSIGNED SCHOOL IS SCHOOL OF CHOICE
....3 (SE070 [PUBLIVE])
REFUSED...RF
DON'T KNOW...DK

SE060a.   [ALL RESPONDENTS WHO ARE IN PUBLIC SCHOOL AND ATTEND A CHOSEN
SCHOOL (SE060=2)]

PUBTYPE   Is {CHILD/TWIN}'s chosen school…
NHES PFI 2003
mod for K, Arcia

PROBE: Magnet schools and charter schools are schools of choice that are not
geographically assigned, that could have a specialized curriculum such as a focus on
languages or science, and that are publicly funded. While magnet schools are run by a local
school district, charter schools are not, and they do not have to follow all of the same rules
and regulations as other public schools.

A public magnet school with a specialized curriculum.....................1
A public magnet school without a specialized curriculum................2
A charter school...3
A regular public school?..4
OTHER...5
REFUSED..RF
DON'T KNOW...DK

SE065.   [ALL RESPONDENTS EXCEPT HOMESCHOOLERS AND CHILDREN NOT YET
ENROLLED IN KINDERGARTEN WHO ARE IN PUBLIC SCHOOL]

PUBDSTCT   Is {his/her} school in your assigned school district?

NHES
2003
              YES...1
              NO...2
              REFUSED..RF
              DON'T KNOW...DK

SE070BX

If SE005=1 [Twin attends the same school as child], skip to SE070a.

SE070.   [ALL RESPONDENTS EXCEPT HOMESCHOOLERS AND CHILDREN NOT YET
              ENROLLED IN KINDERGARTEN WHO ARE IN PUBLIC SCHOOL]

PUBLIVE   Did you choose where to live so that {CHILD} {and {TWIN}} could attend {his/her} current
ECLS-K   school?

              YES...1
              NO...2
              REFUSED..RF
              DON'T KNOW...DK

SE070aBX
GO TO SE075.

SE070a.   [ALL RESPONDENTS EXCEPT HOMESCHOOLERS AND CHILDREN NOT YET
              ENROLLED IN KINDERGARTEN WHO ARE IN PRIVATE SCHOOL]

PRIVOCHR   Did you use a voucher provided by the government to attend this school?
NCES-new

              YES...1
              NO..2 (SE075 [SCLPRFMC])
              REFUSED..RF (SE075 [SCLPRFMC])
              DON'T KNOW...DK (SE075 [SCLPRFMC])

SE070b.   [ALL RESPONDENTS EXCEPT HOMESCHOOLERS AND CHILDREN NOT YET
              ENROLLED IN KINDERGARTEN WHO ARE IN PRIVATE SCHOOL AND SE070a=1.]
VOCHRAMT   Did the voucher pay the full amount of tuition, or only part?

              FULL AMOUNT...1
              PART..2
              REFUSED..RF

DON'T KNOW...DK

SE075.   [ALL RESPONDENTS EXCEPT HOMESCHOOLERS AND CHILDREN NOT YET
            ENROLLED IN KINDERGARTEN]
SCLPRFMC   In deciding between schools, did you seek information on the performance of the schools you
            were considering, like test scores, dropout rates, and so on?

*NHES
2003*

            YES...1
            NO...2
            REFUSED...RF
            DON'T KNOW..DK

┌───┐
│   **SE080BX**   │
│ IF ASKING FOR TWIN AND SE005 = 1 (SAME SCHOOL), GO TO SE085a.   │
│   │
│ IF ASKING FOR TWIN AND SE005 = 1 (SAME SCHOOL) AND SE030 OR   │
│ SE032 NE 1, GO TO SE098BX.   │
│   │
│ ELSE ASK SE080.   │
└───┘

SE080.   [ALL RESPONDENTS EXCEPT HOMESCHOOLERS AND CHILDREN NOT YET
            ENROLLED IN KINDERGARTEN]
SCHLDIST   About how far would you say it is from your home to the school {CHILD/TWIN} attends?

ECLS-K   LESS THAN 1/8TH MILE (LESS THAN 3 BLOCKS)..........................1
            1/8TH MILE TO ¼ MILES (3-5 BLOCKS)..2
            MORE THAN ¼ MILE, BUT LESS THAN ½ MILE (6-9 BLOCKS)....3
            ½ MILE TO LESS THAN 1 MILE (10-19 BLOCKS).........................4
            ONE MILE TO 2.5 MILES (LESS THAN 5 MINUTE DRIVE)............5
            2.6 MILES TO 5 MILES (BETWEEN 5-10 MINUTE DRIVE)............6
            5.1 MILES TO 7.5 MILES (BETWEEN 11 AND 15 MINUTE
              DRIVE)...7
            7.6 MILES TO 10 MILES (BETWEEN 16 AND 20 MINUTE DRIVE),
            OR..8
            11 MILES OR MORE (MORE THAN A 20 MINUTE DRIVE)?..........9
            REFUSED...RF
            DON'T KNOW..DK

┌───┐
│   **SE085Abx**   │
│   │
│ IF GRDLVL NE 2 (CHILD IS IN A GRADE OTHER THAN KINDERGARTEN),   │
│   GO TO SE098BX.   │
└───┘

SE085a.   [ONLY ASK OF FIRST-TIME, ON-TIME AND DELAYED ENTRY KINDERGARTNERS]

Starting school can be a big change for children. These next few items are about how well that transition to school went for {CHILD/TWIN}, and how ready you thought {he/she/they} {was/were} for school.

ACADPREP   How <u>academically</u> prepared do you think {CHILD/TWIN} was for kindergarten? By academically prepared, we mean knowing things like letters and numbers, and being ready to learn. Would you say…

Very prepared...1
Somewhat prepared, or..2
Not at all prepared?..3
DON'T KNOW...RF
REFUSED...DK

SE085b.   [ONLY ASK OF FIRST-TIME, ON-TIME AND DELAYED ENTRY KINDERGARTNERS]
SOCLPREP   How <u>socially</u> prepared do you think {CHILD/TWIN} was for kindergarten? By socially prepared, we mean being ready for the classroom environment, including being able to listen to and follow instructions, express {his/her} needs verbally, and play well with other children. Would you say…

Very prepared...1
Somewhat prepared, or..2
Not at all prepared?..3
DON'T KNOW...RF
REFUSED...DK

SE090.   [ONLY ASK OF FIRST-TIME, ON-TIME AND DELAYED ENTRY KINDERGARTNERS]

PKPREPRD   Do you believe preschool helped to prepare {CHILD/TWIN} for kindergarten? Would you say…

```
A lot...............................................................................1
Somewhat, or.................................................................2
Not at all?.......................................................3 (SE092b)
REFUSED.....................................................................RF
DON'T KNOW.................................................................DK
```

SE092a.   What was the most important way in which preschool helped prepare {CHILD/TWIN} for kindergarten?

HELPPREP   **CODE ALL THAT APPLY.**

HELPED CHILD LEARN SOCIAL SKILLS (E.G., CHILD LEARNED TO FOLLOW DIRECTIONS, PAY ATTENTION, PLAY WELL WITH OTHER CHILDREN, ETC.).......................1
HELPED CHILD LEARN ACADEMIC SKILLS (E.G., CHILD LEARNED LETTERS/NUMBERS)..2
HELPED CHILD DEVELOP PHYSICALLY (E.G., INCREASED COORDINATION, MOTOR SKILLS)..3
ALLOWED CHILD TO CATCH UP IN AGE (I.E., CHILD WILL NOT BE YOUNGEST IN CLASS WHEN HE/SHE ENTERS KINDERGARTEN)...4
OTHER..5
        (Specify: _____)
DON'T KNOW...DK
REFUSED...RF

SE092b.   What could {CHILD/TWIN}'s preschool have done better to help prepare {CHILD/TWIN} for kindergarten?

NTHEPPRP   **CODE ALL THAT APPLY.**

HELP CHILD LEARN SOCIAL SKILLS (E.G., CHILD LEARNED TO FOLLOW DIRECTIONS, PAY ATTENTION, PLAY WELL WITH OTHER CHILDREN, ETC.)………………1
HELP CHILD LEARN ACADEMIC SKILLS (E.G., CHILD LEARNED LETTERS/NUMBERS)………………………………………………………………………2
HELP CHILD DEVELOP PHYSICALLY (E.G., INCREASED COORDINATION, MOTOR SKILLS)…………………………………………………………………………….3
OTHER………………………………………………………………………………4
        (Specify: _____)
NOTHING (I.E., PRESCHOOL PREPARED CHILD WELL FOR KINDERGARTEN)………………5
DON'T KNOW...DK
REFUSED...RF

SE095.   [ONLY ASK OF FIRST-TIME, ON-TIME AND DELAYED ENTRY]

ACTVPREP   Before school started, did you or another family member do anything on your own about the move into kindergarten, such as going to talk with teachers, or taking [CHILD/TWIN] to visit
PEELS   the classroom? Please do **not** include activities organized by the school.

YES...1
NO...2 (SE096a)
DON'T KNOW..DK (SE096a)
REFUSED...RF (SE096a)

SE095a   What did you or another family member do on your own about {CHILD/TWIN}'s move to kindergarten? Did you…

        a. Have {CHILD/TWIN} meet {HIS/HER} new teacher?
        b. Talk to teachers yourself at the school?
        c. Talk to the school administrator?
        d. Take {CHILD/TWIN} to visit the school grounds?
        e. Talk to {CHILD/TWIN} about what kindergarten will be like?

f. Talk to or meet with other kindergarten parents?
g. Volunteer at the school?
h. Read books to {CHILD/TWIN} that talked about starting kindergarten?
i. Read the school's newsletters or other parent resource materials?
j. Obtain information or advice from community services or family support centers?
k. Use the internet to gather information?
l. Anything else?
Other/specify: _____

YES...1
NO...2
DON'T KNOW...DK
REFUSED..RF

SE096a.   Before {CHILD/TWIN} started kindergarten, did you or another family member do any
           enrichment activities to get ready for school? By **enrichment activities**, we mean things that
           focus on reading, doing math, writing, learning music, and other kinds of things children often
           do in a kindergarten classroom. Please do **not** include programs or activities organized by the
           school.

YES...1
NO..2 (SE098BX)
DON'T KNOW...DK (SE098BX)
REFUSED...RF (SE098BX)

SE096b.   Did these activities include learning…

           a.   Reading, writing, or spelling?
           b.   Math concepts, like counting, measurement, or money?
           c.   Social studies concepts, like different cultural backgrounds?
           d.   Science concepts, like the weather, or how things work?
           e.   Music (not including dance)?
           f.   Arts and crafts?
           g.   Dance/creative movement?
           h.   Theater or drama?
           i.   A foreign language (not including English)?
           j.   The English language?
           k.   Anything else? (specify) _____

YES...1
NO...2
DON'T KNOW...DK
REFUSED..RF

SE098BX

IF ASKING ABOUT CHILD, GO TO SE100 [METTCHR].

IF ASKING ABOUT TWIN AND SE005 = 1 (CHILD AND TWIN IN SAME
SCHOOL) AND SE030 [GRADELVL] ARE EQUAL FOR CHILD AND TWIN,
GO TO SE098 [SAMETCHR].

ELSE GO TO SE100 [METTCHR].

SE098.   [ALL RESPONDENTS EXCEPT HOMESCHOOLERS AND CHILDREN NOT YET
                ENROLLED IN KINDERGARTEN]
                Do {CHILD} and {TWIN} have the same teacher?
SAMETCHR

                YES...1
                NO...2
                DON'T KNOW...DK
                REFUSED..RF

SE100BX
IF ASKING FOR TWIN AND SE098 = 1, THEN GO TO SE105BX, ELSE
ASK SE100.

SE100.
METTCHR   [ALL RESPONDENTS EXCEPT HOMESCHOOLERS AND CHILDREN NOT YET
                ENROLLED IN KINDERGARTEN]
                Have you met {CHILD/TWIN}'s teacher yet?

                DISPLAY INSTRUCTIONS:
                Display CHILD'S name or TWIN'S name.

ECLS-K   YES...1
                NO...2
                REFUSED..RF
                DON'T KNOW...DK

SE105BX
IF REPEATER FLAG = 1 (CHILD IS KINDERGARTEN REPEATER), GO TO
SE110BX. ELSE ASK SE105.

SE105.   [ONLY ASK OF FIRST-TIME, ON-TIME AND DELAYED ENTRY]
TRBADJST   Children sometimes have trouble adjusting to school. On average, {since this school year
                began/during the first two months of this school year},
ECLS-K
mod
                (PROBE: Would you say more than once a week, once a week or less, or not at all?)

                DISPLAY INSTRUCTIONS: Display "since this school year began" if child was in school for 8
                weeks or less (SE055 [STARTSCL] <=8). Else, display "during the first two months of this
                school year."

                a.   How often did {CHILD/TWIN} complain about school? Would you say more than
                        once a week, once a week or less, or not at all?
                b.   How often was {CHILD/TWIN} reluctant to go to school?
                c.   How often did {he/she} pretend to be sick to stay home from school?
                d.   How often did {he/she} say good things about school?
                e.   How often did {CHILD/TWIN} say {he/she} liked {his/her} teacher?
                f.   How often did {he/she} look forward to going to school?

MORE THAN ONCE A WEEK...1
ONCE A WEEK OR LESS...2
NOT AT ALL..3
REFUSED..RF
DON'T KNOW..DK

SE110BX
IF HH ROSTER INCLUDES OTHER CHILDREN OLDER THAN
{CHILD/TWIN}, BUT AGED 18 YEARS OR YOUNGER <u>AND</u> THOSE
CHILDREN ARE CHILD'S SIBLINGS (FS040 [RELATE] = 3 OR 4),
ASK SE110 [SIBSMSCL].
IF HH ROSTER INCLUDES ONLY SIBLINGS OLDER THAN 18 YEARS
OF AGE, SKIP TO SE115.
IF NO SIBLINGS IN HH, GO TO SECTION CD.

IF ASKING FOR TWIN AND SE005 = 1 (SAME SCHOOL), GO TO
SECTION CD. ELSE CONTINUE.

SE110.   [ALL RESPONDENTS EXCEPT HOMESCHOOLERS AND CHILDREN NOT YET
                ENROLLED IN KINDERGARTEN]
SIBSMSCL   {Does/do} {NAME OF OLDER SIBLINGS} attend the same school as {CHILD/TWIN}?

                DISPLAY INSTRUCTIONS:
                Display "Does" if only 1 sibling in HH.
                Display "Do" if 2 or more siblings in HH.
                Display siblings in HH who are 18 years of age or younger.

ECLS-K
mod   YES..1
                NO..2
                REFUSED..RF
                DON'T KNOW..DK

SE115BX
IF NO SIBLINGS OVER 18 YEARS OF AGE IN HH, GO TO SECTION CD.
ELSE ASK SE115.

SE115.   [ALL RESPONDENTS EXCEPT HOMESCHOOLERS AND CHILDREN NOT YET
                ENROLLED IN KINDERGARTEN]
SMSCLPST   Did {NAME OF OLDER SIBLINGS} attend the same school in the past?

                DISPLAY INSTRUCTIONS: Display first names of any HH members older than child who are
                siblings (FS040 [RELATE] = 3 or 4) (even if older than 18 years). (ie please display all
                siblings in HH, regardless of their age)

                YES..1
ECLS-K   NO..2
mod   REFUSED..RF
                DON'T KNOW..DK

GO TO SECTION 4 - CD

Section 4-CD: CHILD DEVELOPMENT, LITERACY, AND SCHOOL READINESS

CD001PRE
PRECDEV
Now I'm going to ask you a few questions about {CHILD/TWIN}. These next questions are about things that children can do at different ages. These things may or may not be true for {CHILD/TWIN}.

HELP AVAILABLE

CD020.
READALON
Is {CHILD/TWIN} able to read story books on {his/her} own now?

> YES…....................................………….……………1
> NO...2 (CD023)
> REFUSED...RF (CD023)
> DON'T KNOW...DK

CD021.
READPRTN
Does {CHILD/TWIN} actually read the words written in the book, or does {he/she} look at the book and pretend to read?
> READS THE WRITTEN WORDS.......................................1 (CD022)
> PRETENDS TO READ...2 (CD024)
> DOES BOTH...3 (CD022)
> REFUSED...RF (CD080)
> DON'T KNOW...DK (CD080)

CD022.
AGEREAD
How old was {CHILD/TWIN} in years and months when he/she began reading simple, whole sentences?

Answers must be in range 1-7 yrs, 0-11mths

> YEARS _____   MONTHS_____ (CD080)

CD023.
PIXPRTND
Although {CHILD/TWIN} doesn't yet read storybooks on {his/her} own, does {he/she} ever look at a book with pictures and pretend to read?
> YES…....................................………….……………1
> NO...2 (CD080)
> REFUSED...RF (CD080)
> DON'T KNOW...DK

CD024.
STORY
When {he/she} pretends to read a book, does it sound like a connected story, or does {he/she} tell what's in each picture without much connection between them?

> SOUNDS LIKE A CONNECTED STORY………..................1
> TELLS WHAT IS IN EACH PICTURE………...............………2
> DOES BOTH………………………………………….....………3
> REFUSED...RF
> DON'T KNOW...DK

CD080 a – y

PLAY,EAGER, VOLUNTR, LIKED, SHARE-AGRESV, UNHAPPY, COMPFORTS, USEWORDS, ANGRY, PAYATTN, WORKS, IMPULSV, WORRIES, OVERACTV, INVITES, KPSWRKING, STANDSUP, TEMPER, CONCENTR- ANNOYS, DESTROYS, UNDRSTANDS, MAKEFRIENDS, IMAGINE-INSERT

Next, I have some questions about {CHILD/TWIN}'s behavior. For each of the behaviors I read to you, I'd like you to tell me how often you see {CHILD/TWIN} behave in this way: never, rarely, sometimes, often, or very often. Whenever I ask about how {CHILD/TWIN} behaves with other children, consider children who are close in age to {CHILD/TWIN} – no more than 2 years older or younger than {CHILD/TWIN}. Please base your answers on what you have seen of {CHILD/TWIN}'s behavior during the last 3 months. How often <u>in the last 3 months</u> have the following things occurred? {CHILD/TWIN} …

SHOW CARD CD-1

		Never	Rarely	Some-times	Often	Very Often	Refused	Don't Know
a.	Is invited by other children to play….	☐	☐	☐	☐	☐	☐	☐
b.	Shows eagerness to learn new things...	☐	☐	☐	☐	☐	☐	☐
c.	Volunteers to help other children complete tasks....................	☐	☐	☐	☐	☐	☐	☐
d.	Is accepted and liked by other children..	☐	☐	☐	☐	☐	☐	☐
e.	Accepts friends' ideas in sharing and playing......................................	☐	☐	☐	☐	☐	☐	☐
f.	Is physically aggressive, for example hits, kicks, or pushes........................	☐	☐	☐	☐	☐	☐	☐
g.	Seems unhappy...............................	☐	☐	☐	☐	☐	☐	☐
h.	Comforts other children who are upset..	☐	☐	☐	☐	☐	☐	☐
i.	Appropriately uses a variety of words to describe feelings, such as, excited, mad, frustrated, or tired……	☐	☐	☐	☐	☐	☐	☐
j.	Gets angry easily............................	☐	☐	☐	☐	☐	☐	☐
k.	Pays attention well...........................	☐	☐	☐	☐	☐	☐	☐
l.	Works or plays independently or without the need for adult direction	☐	☐	☐	☐	☐	☐	☐
m.	Acts impulsively without thinking, for example runs across the street without looking	☐	☐	☐	☐	☐	☐	☐

n.   Worries about things .... ☐   ☐ ☐ ☐ ☐   ☐   ☐

o.   Is overly active—unable to sit still.... ☐   ☐ ☐ ☐ ☐   ☐   ☐

p.   Invites other children to play............. ☐   ☐ ☐ ☐ ☐   ☐   ☐

q.   Keeps on working until finished with
     whatever {he/she} is asked to do..... ☐   ☐ ☐ ☐ ☐   ☐   ☐

r.   Stands up for other children's rights
     for example by saying, "That's his!"
       or "It's her turn!".............................. ☐   ☐ ☐ ☐ ☐   ☐   ☐

s.   Has temper outbursts or tantrums.... ☐   ☐ ☐ ☐ ☐   ☐   ☐

t.   Easily adjusts to a new situation… … ☐   ☐ ☐ ☐ ☐   ☐   ☐

u.   Bothers and annoys other children... ☐   ☐ ☐ ☐ ☐   ☐   ☐

v.   Destroys things that belong to
     others.. ☐   ☐ ☐ ☐ ☐   ☐   ☐

w.   Tries to understand another child's
     behavior, for example by asking "Why are
     you crying?" .... ☐   ☐ ☐ ☐ ☐   ☐   ☐

x.   Likes to try new things..................... ☐   ☐ ☐ ☐ ☐   ☐   ☐

y.   Shows imagination in work and
     play... ☐   ☐ ☐ ☐ ☐   ☐   ☐

GO TO SECTION 5-HE

Section 5-HE: HOME ENVIRONMENT
(04/06/06 – Draft 2: HE_PA)

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HE020BX

IF ASKING ABOUT TWIN, SKIP TO PA097BX

</div>

HE020.   The next questions are about reading you do at home.

About how many children's books {does {CHILD}/do {CHILD} and {TWIN}} have in your home now, including library books? Please only include books that are for children.

Answer must be in the range from 0 up to 200.

Interviewer may override range up to 900.

|__|__|__|
ENTER NUMBER OF BOOKS

REFUSED...RF
DON'T KNOW..DK

<div style="border:1px solid black;">

HE070BX

ASK HE070 ONLY FOR CASES SAMPLED AS AMERICAN INDIAN (SAME AS SPECS FOR HE102BX)

</div>

HE070.   At home, how often do you talk to each other in your tribal language? Would you say….
NIES-mod
OFTSPKTL

Never...1
Once in awhile...2
About half the time, or...3
More often?..4
REFUSED...RF
DON'T KNOW...DK

```
┌────────────────────────────────────────────────────────────┐
│                        HE095BX                             │
│                                                            │
│         IF ASKING ABOUT TWIN, GO TO SECTION PA..           │
│            OTHERWISE, CONTINUE WITH HE100.                 │
└────────────────────────────────────────────────────────────┘
```

HE100.   READ FIRST TIME AND AS NECESSARY:
READST In a <u>typical week</u>, how often do you or any other family member do the following things with
OR   {CHILD} {and {TWIN}}? Would you say <u>not at all</u>, <u>once or twice</u>, <u>3 to 6 times</u>, or <u>every day</u>?
TELLSTO
R   a.   Read books to your {child/children}?
SINGSON b.   Tell stories to your {child/children}?
G   c.   Sing songs with your {child/children}?
TALKBO d.   Talk to your {child/children} about books you read to {him/her/them}?
OK

SHOW CARD HE-1

NOT AT ALL..1
ONCE OR TWICE...2
3 TO 6 TIMES...3
EVERY DAY...4
REFUSED...RF
DON'T KNOW...DK

```
┌────────────────────────────────────────────────────────────┐
│                        HE101BX                             │
│                                                            │
│            IF HE100a =1, GO TO HE102BX.                    │
│                                                            │
│               ELSE GO TO HE101.                           │
└────────────────────────────────────────────────────────────┘
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HE101.   On the days someone reads to {CHILD} {and {TWIN}}, about how many minutes per day {is/are} {she/he/they} read to?

Answer must be in range from 0 up to 500.

|__|__|__|
ENTER NUMBER OF MINUTES

REFUSED..RF
DON'T KNOW..DK

HE102BX
IF FS086a [AMERIND]=1 AND HE100a NE 1, ASK HE102 AND HE103.
OTHERWISE SKIP TO SECTION PA.

HE102.   When you read to {CHILD} {and {TWIN}}, do you read books about Native culture and history?

YES...1
NO..2
REFUSED..RF
DON'T KNOW..DK

HE103.   Do you read books to {him/her/them} written by American Indian or Alaska Native authors?

YES...1
NO..2
REFUSED..RF
DON'T KNOW..DK

GO TO SECTION 6-PA.

Section 6-PA: PARENTING BEHAVIOR AND ATTITUDES

PA090BX

IF ASKING ABOUT TWIN, SKIP TO PA097BX

PA095.   Now I'm going to ask you how important you think it is for <u>any</u> child to know or do certain things to be ready for kindergarten. Would you say essential, very important, somewhat important, not very important, or not at all important?

How important do you think it is that a child…

SHOW CARD PA-1

a.   Finishes tasks

b.   Can count to 20 or more
c.   Takes turns and shares
d.   Has good problem-solving skills
e.   Is able to use pencils and paint brushes
f.   Is not disruptive of the class
g.   Knows the English language
h.   Is sensitive to other children's feelings
i.   Sits still and pays attention
j.   Knows most of the letters of the alphabet
k.   Can follow directions
l.   Identifies primary colors and shapes
m. Communicates needs, wants, and thoughts verbally in {his/her} primary language
n.   Writes {his/her} own name
o.   Reads or pretends to read storybooks

ESSENTIAL……………………………1
VERY IMPORTANT…………………..2
SOMEWHAT IMPORTANT…………..3
NOT VERY IMPORTANT…………….4
NOT AT ALL IMPORTANT…………..5
REFUSED……………………………RF
DON'T KNOW………………………...DK

PA097BX

ASK PA097 IF SE030=2 OR SE032=2 (CHILD/TWIN IS IN KINDERGARTEN).

PA097.　　　　What do you think is the <u>most important</u> thing you have done to prepare {CHILD/TWIN}
　　　　　　　　for kindergarten?
PREPFORK

SHARED TEACHING/LEARNING ACTIVITIES..................1
NURTURING HOME ENVIRONMENT...............................2
READING TO CHILD BY PARENTS..................................3
EDUCATIONAL PRESCHOOL..4
HEAD START..5
DAY CARE..6
COMPUTER..7
TEACHING SELF HELP SKILLS.......................................8
OLDER SIBLINGS..9
STAY AT HOME MOM...10
SHARING RELIGIOUS BELIEFS/TRADITIONS...............11
MONITORING TELEVISION..12
OTHER, SPECIFY (_____)....................13
REFUSED..RF
DON'T KNOW..DK

GO TO SECTION 7-CC.

Section 7-CC: CHILD CARE ARRANGEMENTS

CC001Pre.   I'd like to talk to you about all child care {CHILD/TWIN} now receives {before or after school} on a <u>regular basis</u> from someone other than {you/{his/her} parents or guardians}. This includes regular care and early childhood programs, whether or not there is a charge or fee, but not occasional baby-sitting or backup care providers.

<div style="border:1px solid">

CC001BX

IF ASKING ABOUT TWIN, GO TO CC005. ELSE, GO TO CC115.

</div>

<div align="right">

HELP AVAILABLE

</div>

CC005.
CURRCHCA   Next, I'd like to talk to you about all child care arrangements you have for {TWIN} on a <u>regular basis</u>. Does {TWIN} currently have the same child care arrangements as {CHILD}?

            YES...1 (SECTION 8-CH)
            NO...2
            REFUSED..RF
            DON'T KNOW...DK

<div align="right">

HELP AVAILABLE

</div>

CC115.   Is {CHILD/TWIN} <u>now</u> receiving care from a relative other than a parent on a <u>regular basis</u> {before or after school}, for example from grandparents, brothers or sisters, or any other relatives?

DISPLAY: Display "before or after school" if (SE010 = 1 OR SE015 = 1) AND (SE030 NE 1 AND SE032 NE 1).

            YES...1 (CC135)
            NO...2 (CC220)
            REFUSED..RF (CC220)
            DON'T KNOW...DK (CC220)

CC135.   How many different <u>regular</u> care arrangements do you currently have with relatives for {CHILD/TWIN}?

            ONE..1
            TWO...2
            THREE...3
            FOUR OR MORE...4
            REFUSED..RF
            DON'T KNOW...DK

CC140.   {Let's talk about the relative who provides the <u>most</u> care for {CHILD/TWIN} now.} Is that relative {CHILD/TWIN}'s…

DISPLAY INSTRUCTIONS: If multiple arrangements (CC135=2, 3, or 4) display the sentence "Let's talk about…{CHILD/TWIN} now." Else, use a null display.

> Grandparent,...1
> Aunt,..2
> Uncle,..3
> Brother,..4
> Sister, or..5
> Another relative?..91
> (Specify) [*Who is the relative that takes care of the {CHILD/TWIN}?*]_____
> REFUSED...RF
> DON'T KNOW...DK

CC141BX

IF (SE010=1 OR SE015=1) AND SE030 NE 1 AND SE032 NE 1, ASK CC141. ELSE, ASK CC145.

(*CC141 is asked for children in school only*)

CC141.   Does {CHILD/TWIN} receive care from {{his/her} {RELATIVE}/that relative} before
Mod   school, after school, or on weekends?
RELTCARE

       CODE ALL THAT APPLY.

DISPLAY INSTRUCTIONS: If relative named above in CC140, display "{RELATIVE}": "aunt", "uncle", "brother", "sister", "grandparent" as appropriate. Otherwise, display "that relative".

> BEFORE SCHOOL..1
> AFTER SCHOOL...2
> ON WEEKENDS..3
> REFUSED...RF
> DON'T KNOW   ……………………………………………….DK

CC145.   Is the care provided by {{CHILD/TWIN}'s {RELATIVE}/that relative} in your home or another home?

> OWN HOME...1
> OTHER HOME..2
> BOTH/VARIES..3
> REFUSED...RF
> DON'T KNOW...DK

CC165.   How many <u>hours</u> each <u>week</u> does {CHILD/TWIN} receive care from {{his/her} {RELATIVE}/that relative}?

IF LESS THAN 1 HOUR, ENTER 0.

Answer must be in range from 0 up to 80.

Interviewer may override range up to 120.

|___|___|
ENTER NUMBER OF HOURS

REFUSED..RF
DON'T KNOW...DK

CC170.   How many <u>days</u> each week does {CHILD/TWIN} receive care from {{his/her} {RELATIVE}/that relative}?

Answer must be in range from 1 up to 7.

Check response against HrsWeek (CC165). HrsWeek divided by DaysWeek cannot be greater than 24 (child cannot be in relative care more than 24 hours per day).

|___|
ENTER NUMBER OF DAYS

REFUSED..RF
DON'T KNOW...DK

If CC141=3 and (CC141~=1 and CC141~=2) and (CC170=0 or CC170>2),
then display check message:

IN QUESTION CC141, YOU ENTERED THAT THE {CHILD/TWIN} RECEIVES CARE
FROM THAT PERSON ONLY ON WEEKENDS. IN CC170, YOU ENTERED THAT THE
CHILD IS IN CARE FOR A TOTAL OF {CF170} DAYS A WEEK. PLEASE VERIFY
YOUR RESPONSE AND PRESS 'S' IF THIS IS CORRECT. ENTER THE CORRECT
RESPONSE IN CC141 IF IT IS INCORRECT.

CC218BX
IF CC135 = 1, RF, OR DK, GO TO CC220. ELSE GO TO CC218.

CC218.   You said that {CHILD/TWIN} was cared for by {NUMBER} other {relative/relatives} on a regular basis. How many <u>total hours</u> each <u>week</u> does {CHILD/TWIN} receive care from {this/these} other {relative/relatives}?

Answer must be in range from 0 to 80.

                    |___|___|
                    ENTER NUMBER OF HOURS
                    REFUSED..RF
                    DON'T KNOW..DK

CC220.   Now I'd like to ask you about any care {CHILD/TWIN} receives from someone not related
PRIVHOME   to {him/her} in your home or someone else's home on a regular basis, {before or after school}. This includes home child care providers, regular sitters, or neighbors, but does not include day care centers or preschools. Is {CHILD/TWIN} <u>now</u> receiving care in a private home on a <u>regular basis</u> from someone who is not related to {him/her}?

DISPLAY INSTRUCTION: DISPLAY 'BEFORE OR AFTER SCHOOL' IF SE010=1 AND SE015 NE 1 AND SE030 NE 1 AND SE032 NE 1.

                    YES...1
                    NO...2   (CC410BX)
                    REFUSED...RF   (CC410BX)
                    DON'T KNOW..DK   (CC410BX)

CC240.   How many different <u>regular</u> care arrangements do you currently have with non-relatives for {CHILD/TWIN}?

                    ONE...1
                    TWO...2
                    THREE..3
                    FOUR OR MORE...4
                    REFUSED...RF
                    DON'T KNOW..DK

CC245.   {Let's talk about the non-relative who provides the <u>most</u> care for {CHILD/TWIN}.} Is that care provided in your home or another home?

                    DISPLAY INSRUCTIONS: If CC240 >1, display the sentence "Let's talk about…{CHILD/TWIN}." Otherwise, use a null display.

                    OWN HOME..1
                    OTHER HOME...2
                    BOTH/VARIES..3
                    REFUSED...RF
                    DON'T KNOW..DK

```
┌────────────────────────────────────────────────────────────────┐
│                          CC246BX                               │
│  IF SE010=1 AND SE015 NE 1 AND SE030 NE 1 AND SE032 NE 1, ASK  │
│   CC246.  ELSE IF SE015=1 OR (SE030=1 OR SE032=1), ASK CC248.  │
│          (CC246 is asked for children in school only.)          │
└────────────────────────────────────────────────────────────────┘
```

CC246.   Does {CHILD/TWIN} receive care from that person before school, after school, or on
WHENCARE   weekends?

                        CODE ALL THAT APPLY.

                        BEFORE SCHOOL..1
                        AFTER SCHOOL...2
                        ON WEEKENDS..3
                        REFUSED..RF
                        DON'T KNOW   …………………………………………….DK

CC248.   Does this person who cares for {CHILD/TWIN} live in your household?

                        YES..1
                        NO...2
                        REFUSED..RF
                        DON'T KNOW...DK

                                                              HELP AVAILABLE
CC265.   How many <u>days</u> each week does {CHILD/TWIN} receive care from that person?
ECLS-K
Answer must be in range from 1 up to 7.

                        |___|
                        ENTER NUMBER OF DAYS

                        REFUSED ....RF
                        DON'T KNOW ....DK

If CC246=3 and (CC246~=1 and CC246~=2) and (CC265=0 or CC265>2), then display check message:

IN QUESTION CC246, YOU ENTERED THAT THE {CHILD/TWIN} RECEIVES CARE FROM THAT
PERSON ONLY ON WEEKENDS. IN CC265, YOU ENTERED THAT THE CHILD IS IN CARE FOR A
TOTAL OF {CF265} DAYS A WEEK. PLEASE VERIFY YOUR RESPONSE AND PRESS 'S' IF THIS IS
CORRECT. ENTER THE CORRECT RESPONSE IN CC246 IF IT IS INCORRECT.

CC270.   How many <u>hours</u> each week does {CHILD/TWIN} receive care from that person?

IF LESS THAN 1 HOUR, ENTER 0.

Answer must be in range from 0 up to 80.

Interviewer may override range up to 120.

Answer cannot be more than 24 times response to WeekDays (child cannot be in nonrelative care more than 24 hours per day).

|___|___|
ENTER NUMBER OF HOURS

REFUSED ....RF
DON'T KNOW ....DK

```
                        CC318BX
   IF CC240 > 1 (CHILD IS CURRENTLY RECEIVING CARE FROM
        MORE THAN ONE NON-RELATIVE), GO TO CC318.
                ELSE, GO TO CC410BX.
```

CC318.   You said that {CHILD/TWIN} was cared for by {NUMBER} other non-{relative/relatives} on a regular basis. How many <u>total hours</u> each <u>week</u> does {CHILD/TWIN} receive care from {this/these} non-{relative/relatives}?
Answer must be in range from 0 up to 80.

|___|___|
ENTER NUMBER OF HOURS

REFUSED..RF
DON'T KNOW..DK

```
                        CC410BX

   IF (SE010=1 AND SE030 NE 1 AND SE032 NE 1) OR SE015 = 1, GO
   TO CC410b.

   ELSE, GO TO CC410a.
```

CC410a.   .Is {CHILD/TWIN} <u>now</u> attending a center-based care program on a <u>regular basis</u>?
CCCNOW
ECLS-K
mod for K
round
ECLS-K

          YES.. 1.. (CC430)
          NO.. 2.. (CC520)
          REFUSED.. RF (CC520)
          DON'T KNOW.. DK (CC520)

CC410b.   Now I want to ask you about before- and after-school care programs that take place in child
BACNOW   care centers or at the school that {CHILD/TWIN} may attend. Is {CHILD/TWIN} now
ECLS-K mod   attending a before and after care program on a regular basis?
for K
roundECLS-K

          YES.. 1.. (CC430)
          NO.. 2.. (CC520)
          REFUSED.. RF (CC520)
          DON'T KNOW.. DK (CC520)

CC430.   How many different day care centers, nursery schools, preschools, pre-kindergartens or
                before- or after-school programs does {CHILD/TWIN} <u>currently</u> go to?

DISPLAY INSTRUCTIONS:

          ONE...1
          TWO...2
          THREE..3
          FOUR OR MORE...4
          REFUSED...RF
          DON'T KNOW..DK

CC432.   {Let's talk about the program where {CHILD/TWIN} spends the most time.} Would you
                  call {it/the program}…

DISPLAY INSTRUCTIONS:
If CC430 =2, 3, or 4, display the sentence "Let's talk about…{CHILD/TWIN} spends the most time." and
"the program". Else, blank and "it".

A day care center...1
A nursery school..2
A preschool...3
A pre-kindergarten...4
A before- or after-school program, or................................5
Something else?..6
  SPECIFY_____
REFUSED...RF
DON'T KNOW...DK

CC432aBX
IF (SE010=1 OR SE015=1) AND SE030 NE 1 AND SE032 NE 1 (CHILD
IS IN SCHOOL), ASK CC432a.
ELSE, ASK CC433.
(*CC432a is asked for children in school only.*)

CC432a.   Does {CHILD/TWIN} receive care at that center before school, after school, or on
MOSTWHEN   weekends?

CODE ALL THAT APPLY.

BEFORE SCHOOL...1
AFTER SCHOOL...2
ON WEEKENDS..3
REFUSED...RF
DON'T KNOW……………………………………………….DK

CC433.   Where is the program located? For example, is it in a church or synagogue, a school, a
community center, its own building, or some other building?

YOUR HOME...1
ANOTHER HOME...2
A CHURCH, SYNAGOGUE, OR OTHER PLACE OF
WORSHIP...3
A PUBLIC SCHOOL..4
A PRIVATE SCHOOL..5
A COLLEGE OR UNIVERSITY...6
A COMMUNITY CENTER..7
A PUBLIC LIBRARY...8
ITS OWN BUILDING..9
MORE THAN ONE PLACE...10
ENTER SOME OTHER PLACE...11
[Where is the program located?]

_____
REFUSED...RF
DON'T KNOW...DK

CC436.   How many <u>days</u> each week does {CHILD/TWIN} go to that program?
Answer must be in range from 1 up to 7.

|___|
ENTER NUMBER OF DAYS

REFUSED..RF
DON'T KNOW...DK

CC440.   How many <u>hours</u> each <u>week</u> does {CHILD/TWIN} go to that program?
Answer must be in range from 0 up to 70.

Answer cannot be more than 12 times response to CC436 (child cannot be in center-based care more than 12 hours per day).

|___|___|
ENTER NUMBER OF HOURS

REFUSED..RF
DON'T KNOW...DK

HELP AVAILABLE

CC520.
CHILDHOME   Sometimes children spend time caring for themselves, either at home or somewhere else, without an adult or older child responsible for them. Does {CHILD/TWIN} spend time caring for {himself/herself} on a regular basis before or after school?

ECLS-K

YES.. 1
NO... 2 (CC600BX)
REFUSED .... RF(CC600BX)
DON'T KNOW... DK(CC600BX)

CC521.   About how often does this happen?

ALMOST EVERY DAY...1
A FEW TIMES A WEEK...2
ONCE A WEEK...3
A FEW TIMES A MONTH...4
ONCE A MONTH...5
LESS OFTEN..6
IT'S ONLY HAPPENED ONCE OR TWICE.........................7
REFUSED...RF
DON'T KNOW   DK

(Source for all: NHES 2001)

CC600.
AFSCACT

Now I'd like to ask about {CHILD/TWIN}'s activities during the time {he/she} spends at the after-school program. During those after-school hours, what does {CHILD/TWIN} spend most of {his/her} time doing? You may name up to three things.

HOMEWORK/SCHOOL-RELATED/EDUCATIONAL………………..1
COMPUTERS………………………………………………………..2
READING/WRITING (NON-SCHOOL-RELATED)……………………3
ARTS (PERFORM OR STUDY MUSIC, CRAFTS, DRAMA, ETC.)…4
CHORES/WORK………………………………………………….....5
OUTDOOR PLAY/ACTIVITIES/SPORTS……………………………6
INDOOR PLAY……………………………………………………....7
EATING/SNACKS……………………………………………………9
TELEVISION/VIDEOS/VIDEO GAMES/LISTENING TO MUSIC…...10
TALKING TO CARE PROVIDER…………………………11
TALKING WITH FRIENDS/SOCIALIZING…………………………..12
OTHER………………………………………………………………..13
SPECIFY_____

CC605.
PHYSACTV   Does the program set aside time for physical activities like sports or games?

YES…………………1
NO…………………..2

CC610.
HOMEWORK   Does the program set aside time for {CHILD/TWIN} to do homework?

YES…………………1
NO…………………..2

CC615.
USECMPTR   Does {CHILD/TWIN} have the opportunity to use a computer at the program?

YES…………………1
NO…………………..2

GO TO SECTION 8-CH

Section 8-CH: CHILD HEALTH

CH021

Now I'd like to ask you about {CHILD/TWIN}'s eating habits and health.

The next questions ask about food {CHILD/TWIN} ate or drank during the past 7 days. Think about all the meals and snacks {CHILD/TWIN} had from the time {he/she} got up until {he/she} went to bed. Be sure to include food {CHILD/TWIN} ate at home, school, restaurants, play dates, anywhere else, and over the weekend.

Let's start with the kinds of milk {CHILD/TWIN} drinks. Include all types of milk, including cow's milk, soy milk or any other kind of milk; include the milk {he/she} drank in a glass or cup, from a carton, or with cereal. Count the half pint of milk served at school as equal to one glass. During the past 7 days, how many times did {CHILD/TWIN} drink milk? Would you say…

SHOW CARD CH-1

Once a day,..1
Twice a day,...2
Three times a day,...3
Four or more times a day,...4
One to three times during the past 7 days,.........................5
Four to six times during the past 7 days, or........................6
Your child did not drink
milk during the past 7 days...............................…………7(CH041)
REFUSED..RF
DON'T KNOW..DK

CH037

What kind of milk did your child usually (most often) drink during the past 7 days?

SHOW CARD CH-2

WHOLE MILK..1
2% MILK...2
SKIM MILK..3
LOW FAT OR 1% MILK..4
SOY MILK...5
BOTH REGULAR COW'S MILK AND SOY MILK...............6
SOME OTHER...7
SPECIFY OTHER KIND OF MILK: _____
REFUSED..RF
DON'T KNOW..DK

CH041

During the past 7 days, how many times did your child drink 100% fruit juices such as orange juice, apple juice, or grape juice? Do not count punch, Sunny Delight, Kool-Aid, sports drinks, or other fruit-flavored drinks.
SHOW CARD CH-3

```
1 TIME PER DAY...............................................................1
2 TIMES PER DAY.............................................................2
3 TIMES PER DAY.............................................................3
4 OR MORE TIMES PER DAY...........................................4
1 TO 3 TIMES DURING THE PAST 7 DAYS......................5
4 TO 6 TIMES DURING THE PAST 7 DAYS......................6
CHILD DID NOT DRINK 100% FRUIT JUICE
DURING THE PAST 7 DAYS............................................7
REFUSED....................................................................RF
DON'T KNOW...............................................................DK
```

CH043

During the past 7 days, how many times did your child drink soda pop (for example, Coke, Pepsi, or Mountain Dew), sports drinks (for example, Gatorade), or fruit drinks that are not 100% fruit juice (for example, Kool-Aid, Sunny Delight, Hi-C, Fruitopia, or Fruitworks)?

SHOW CARD CH-4

```
1 TIME PER DAY...............................................................1
2 TIMES PER DAY.............................................................2
3 TIMES PER DAY.............................................................3
4 OR MORE TIMES PER DAY...........................................4
1 TO 3 TIMES DURING THE PAST 7 DAYS......................5
4 TO 6 TIMES DURING THE PAST 7 DAYS......................6
CHILD DID NOT DRINK ANY DURING THE
PAST 7 DAYS...................................................................7
REFUSED....................................................................RF
DON'T KNOW...............................................................DK
```

CH044

During the past 7 days, how many times did your child eat fresh fruit, such as apples, bananas, oranges, berries or other fruit such as applesauce, canned peaches, canned fruit cocktail, frozen berries, or dried fruit? Do not count fruit juice.

SHOW CARD CH-5

```
1 TIME PER DAY...............................................................1
2 TIMES PER DAY.............................................................2
3 TIMES PER DAY.............................................................3
4 OR MORE TIMES PER DAY...........................................4
1 TO 3 TIMES DURING THE PAST 7 DAYS......................5
4 TO 6 TIMES DURING THE PAST 7 DAYS......................6
CHILD DID NOT EAT FRUIT DURING THE
PAST 7 DAYS...................................................................7
REFUSED....................................................................RF
DON'T KNOW...............................................................DK
```

CH045

During the past 7 days, how many times did your child eat vegetables other than French fries and other fried potatoes? Include vegetables like those served as a stir fry, soup, or stew, in your response.

SHOW CARD CH-6

1 TIME PER DAY...1
2 TIMES PER DAY...2
3 TIMES PER DAY...3
4 OR MORE TIMES PER DAY...4
1 TO 3 TIMES DURING THE PAST 7 DAYS......................5
4 TO 6 TIMES DURING THE PAST 7 DAYS.......................6
CHILD DID NOT EAT VEGETABLES
DURING THE PAST 7 DAYS..7
REFUSED..RF
DON'T KNOW...DK

CH046

During the past 7 days, how many times did your child eat a meal or snack from a fast food restaurant with no wait service such as McDonald's, Pizza Hut, Burger King, Kentucky Fried Chicken, Taco Bell, Wendy's and so on? Consider both eating out, carry out, and delivery of meals in your response.

SHOW CARD CH-7

1 TIME PER DAY...1
2 TIMES PER DAY...2
3 TIMES PER DAY...3
4 OR MORE TIMES PER DAY...4
1 TO 3 TIMES DURING THE PAST 7 DAYS......................5
4 TO 6 TIMES DURING THE PAST 7 DAYS.......................6
CHILD DID NOT EAT FOOD FROM A FAST FOOD
RESTAURANT DURING THE PAST 7 DAYS.....................7
REFUSED..RF
DON'T KNOW...DK

CH047

During the past 7 days, how many times did your child eat candy (including Fruit Roll-Ups and similar items), ice cream, cookies, cakes, brownies, or other sweets?

SHOW CARD CH-8

1 TIME PER DAY...1
2 TIMES PER DAY...2
3 TIMES PER DAY...3
4 OR MORE TIMES PER DAY...4
1 TO 3 TIMES DURING THE PAST 7 DAYS......................5
4 TO 6 TIMES DURING THE PAST 7 DAYS......................6
CHILD DID NOT EAT ANY SWEETS
DURING THE PAST 7 DAYS..7

CH048

During the <u>past 7 days</u>, how many times did your child eat potato chips, corn chips such as Fritos or Doritos, Cheetos, pretzels, popcorn, crackers or other salty snack foods?

SHOW CARD CH-9

1 TIME PER DAY...1
2 TIMES PER DAY...2
3 TIMES PER DAY...3
4 OR MORE TIMES PER DAY..4
1 TO 3 TIMES DURING THE PAST 7 DAYS......................5
4 TO 6 TIMES DURING THE PAST 7 DAYS......................6
CHILD DID NOT EAT ANY SALTY SNACKS
DURING THE PAST 7 DAYS...7
REFUSED...RF
DON'T KNOW...DK

CH050a.
SPECDIET

Do you have your child on any special diet?

YES...................................…………………………………1
NO..2 (CH051)
REFUSED...RF(CH051)
DON'T KNOW..DK(CH051)

CH050b. What type of diet?
DIETTYPE

CODE ALL THAT APPLY.

LOW SATURATED FAT AND CHOLESTEROL..................1
MILK PROTEIN FREE..2
LACTOSE FREE...3
GLUTEN RESTRICTED...4
PEANUT FREE...5
SHELLFISH FREE...6
EGG FREE...7
VEGETARIAN...8
REFUSED..RF
DON'T KNOW...DK

CH051.   During the past 12 months, did {CHILD/TWIN} take any vitamin or mineral supplements
CH049   of any kind?
PreK
VITAMINS

```
                    YES.........................……………………………………1
                    NO...............................................................................2
                    REFUSED...................................................................RF
                    DON'T KNOW...............................................................DK
```

CH055.   Would you say {CHILD/TWIN}'s health is…

```
                    Excellent,...............................……………………………………1
                    Very good,.........................................................................2
                    Good,........................................…………………………3
                    Fair, or.............................................................................4
                    Poor?.................................……………………………………5
                    REFUSED...................................................................RF
                    DON'T KNOW...............................................................DK
```

+---+
| **CH057BX** |
| PRE-LOAD dental care from K '06 DATA. IF K '06 CH057=1, GO TO |
| CH060. ELSE ASK CH057. |
+---+

CH057.   Has {CHILD/TWIN} ever been to a dentist or dental hygienist for dental care?

```
                    YES.........................……………………………………1
                    NO...............................................................................2
                    REFUSED...................................................................RF
                    DON'T KNOW...............................................................DK
```

                                            HELP AVAILABLE

CH060.   Since {CHILD/TWIN} turned 5 years old, how many times has {CHILD/TWIN} gone for
CHECKUPS   well-child checkups?

        PROBE: These are visits to the doctor when {he/she} isn't sick, but to get {him/her}
        checked over or to get vaccinations.

Answer must be in range from 0 up to 2.

Interviewer may override range up to 4.

IF '0' GO TO CH080.

```
                    |___|___|
                    NUMBER OF TMES

                    REFUSED...................................................................RF
                    DON'T KNOW...............................................................DK
```

CH065.   What kind of place do you usually take {CHILD/TWIN} for checkups?
PLACCARE

>   CLINIC OR HEALTH CENTER...1
>   DOCTOR'S OFFICE OR HMO...2
>   HOSPITAL EMERGENCY ROOM......................................3
>   HOSPITAL OUTPATIENT DEPARTMENT.........................4
>   SOME OTHER PLACE..5
>   DOESN'T GO TO ONE PLACE MOST OFTEN..................6
>   REFUSED..RF
>   DON'T KNOW..DK

<div align="right">HELP AVAILABLE</div>

CH080.   Since {CHILD/TWIN} turned 5 years old, has a doctor, nurse, or other medical professional
ASTHMA   told you that {CHILD/TWIN} has...
RESPILL
EARINFEC

		Yes	No	Refused	Don't Know
c.	An ear infection?	☐	☐	☐	☐

> | **CH125BX** |
> |---|
> | IF CH080c = 1 (EAR INFECTION), GO TO CH125. ELSE, GO TO CH140. |

CH125.   Since {CHILD/TWIN} turned 5 years old, how many times has a doctor, nurse, or other
TIMESEAR   medical professional told you that {CHILD/TWIN} had an ear infection?
Answer must be in range from 1 up to 4.

Interviewer may override range up to 24.

> |___|___|
>   NUMBER OF TMES
>
>   REFUSED..RF
>   DON'T KNOW..DK

CH130.   How was {CHILD/TWIN}'s {<u>most recent/first/second/third</u>} ear infection {since {he/she}
EARTRE   turned 5 years old} treated by your doctor, nurse, or other medical professional?

CODE ALL THAT APPLY.
Ask for each of up to three ear infections—display "first" first time through, "second" second time through, "third" third time through, and "most recent" if CH125 response is "don't know" or "refused." If child only had one ear infection, use null display. Display "since {he/she} turned 5 years old" at all times except when displaying "most recent."

NO TREATMENT/WATCH AND WAIT...............................1
DECONGESTANTS/ANTIHISTAMINES............................2
ANTIBIOTICS..3
WITH EAR TUBES...4
ANALGESICS (E.G., FEVER REDUCER OR PAIN RELIEVER) 5
EAR DROPS...6
ENTER OTHER (Specify) [*How was the ear infection
treated?*]_____)................................91
REFUSED..RF
DON'T KNOW..DK

CH135.   Since {CHILD/TWIN} turned 5 years old, how many other times do you think
EARNOTRE   {CHILD/TWIN} has had an ear infection or earache for which you did not seek medical
treatment?

NEVER..1
ONCE..2
TWICE...3
3-5 TIMES...4
6 OR MORE TIMES..5
REFUSED..RF
DON'T KNOW..DK

CH140.   Since {CHILD/TWIN} turned 5 years old, has {CHILD/TWIN} had ear tubes inserted?
HADEARTUBES

YES, IN ONE EAR..1
YES, IN BOTH EARS..2
NO...3
REFUSED..RF
DON'T KNOW..DK

CH145BX
IF CH140 = 1 OR 2 (EAR TUBES), GO TO CH145. ELSE, GO TO
CH173BX.

CH145.   Were ear tubes inserted because of…

Fluid in the ears,..1
Ear infections,...2
Both, or...3
For another problem?...4
ENTER (*Specify)   [Why were ear tubes inserted*?]

_____

REFUSED..RF
DON'T KNOW...DK

CH173BX

ASK CH173 ONLY IF SE010 = 1 AND SE015 NE 1 AND SE030 NE 1
AND SE032 NE 1 (CHILD IS IN SCHOOL). ELSE GO TO CH175.

CH173.
MISSSCHL
Has {CHILD/TWIN} missed two or more weeks of school this year because of a health problem?

*ECLS-K teacher
mod*

YES..1
NO..2
REFUSED..RF
DON'T KNOW...DK

CH175.

LIMITACT

Are {CHILD/TWIN}'s activities limited in <u>any way</u> because of a health problem?

YES..1
NO..2
REFUSED..RF
DON'T KNOW...DK

CH177.   Has {CHILD/TWIN} taken a prescription medicine <u>every day</u> for at least three months?
RXDAILY

PROBE: For example, this might be due to continuous prescriptions for antibiotics for ear
infections.

YES..1 (CH178)
NO..2 (CH181)
REFUSED..RF (CH181)
DON'T KNOW...DK (CH181)

CH178.   Why does {CHILD/TWIN} have to take this medicine? Is it for…

            ADHD (or attention deficit hyperactivity disorder),...............1
            Another behavioral problem (not ADHD),...........................2
            Asthma,..3
            Allergies,...4
            Seizures, ...5
            To get more fluoride, or..6
            For some other reason? 91
            ENTER OTHER (Specify) [*What is that other reason your child takes this medicine?*]

            _____
            REFUSED...RF
            DON'T KNOW..DK

                                                                        HELP AVAILABLE
CH181.   Now I have some questions about different disabilities your child might have.
CH181 Pre-K
ATTNEVAL   Since {CHILD/TWIN} turned 5 years old, has {CHILD/TWIN} been evaluated by a professional in response to {his/her} ability to pay attention or learn?

            YES…......................................…………………………1
            NO...2 (CH183)
            REFUSED..RF (CH183)
            DON'T KNOW...DK (CH183)

CH182.   Did you obtain a diagnosis of a problem from a professional?
CH182 Pre-K
            YES…......................................…………………………1
            NO...2
            REFUSED..RF
            DON'T KNOW...DK

CH183.   Since {CHILD/TWIN} turned 5 years old, has {CHILD/TWIN} been evaluated by a
CH183 Pre-K   professional in response to {his/her} overall activity level?
ACTVEVAL
            YES…......................................…………………………1
            NO...2 (CH185)
            REFUSED..RF (CH185)
            DON'T KNOW...DK (CH185)

CH184.   Did you obtain a diagnosis of a problem from a professional?
CH184 Pre-K
ACTVDIAG

```
YES…..........................................................................1
NO.................................................................................2
REFUSED....................................................................RF
DON'T KNOW..............................................................DK
```

CH185.   Since {CHILD/TWIN} turned 5 years old, has {CHILD/TWIN} been evaluated by a
CH185 Pre-K   professional in response to the use of {his/her} limbs?
LIMBEVAL

```
YES…..........................................................................1
NO.................................................................................2  (CH187)
REFUSED....................................................................RF  (CH187)
DON'T KNOW..............................................................DK  (CH187)
```

CH186.   Did you obtain a diagnosis of a problem from a professional?
CH186 Pre-K

```
YES…..........................................................................1
NO.................................................................................2
REFUSED....................................................................RF
DON'T KNOW..............................................................DK
```

CH187.   Since {CHILD/TWIN} turned 5 years old, has {CHILD/TWIN} been evaluated by a
CH187 pre-K   professional in response to {his/her} ability to communicate?
COMMEVAL

```
YES…..........................................................................1
NO.................................................................................2  (CH189)
REFUSED....................................................................RF  (CH189)
DON'T KNOW..............................................................DK  (CH189)
```

CH188.   Did you obtain a diagnosis of a problem from a professional?
CH188 Pre-K

```
YES…..........................................................................1
NO.................................................................................2
REFUSED....................................................................RF
DON'T KNOW..............................................................DK
```

CH189.   Does {CHILD/TWIN} have difficulty hearing and understanding speech in a normal
CH189 Pre-K   conversation?

```
YES…..........................................................................1
NO.................................................................................2
REFUSED....................................................................RF
DON'T KNOW..............................................................DK
```

                                                                HELP AVAILABLE
CH190.   Since {CHILD/TWIN} turned 5 years old, have you had {CHILD/TWIN}'s hearing
CH190 Pre-K   evaluated by a professional?
HEAREVAL

YES…..............................…………………………….1
        NO...2 (CH192)
        REFUSED...RF (CH192)
        DON'T KNOW...DK (CH192)

CH191.   Did you obtain a diagnosis of a problem from a professional?
CH191 Pre-K

        YES…..............................…………………………….1
        NO...2
        REFUSED...RF
        DON'T KNOW...DK

CH192.   Now I want to ask you about {CHILD/TWIN}'s vision. Does {CHILD/TWIN} have difficulty
CH192 Pre-K   seeing objects in the distance or letters on paper?

        YES…..............................…………………………….1
        NO...2
        REFUSED...RF
        DON'T KNOW...DK

                                                                HELP AVAILABLE
CH193.   Since {CHILD/TWIN} turned 5 years old, has {CHILD/TWIN}'s vision been evaluated by
CH193 Pre-K   a professional?
VISNEVAL

        YES…..............................…………………………….1
        NO...2 (CH196BX)
        REFUSED...RF (CH196BX)
        DON'T KNOW...DK (CH196BX)

CH194.   Did you obtain a diagnosis of a problem from a professional?
CH194 Pre-K

        YES…..............................…………………………….1
        NO...2
        REFUSED...RF
        DON'T KNOW...DK

        PRG: CH195 MOVED TO CH242.

+---+
| **CH196BX** |
| IF ANY DISABILITY DIAGNOSED IN CH182, CH184, CH186, CH188, |
| CH191, OR CH194, THEN ASK CH196. OTHERWISE, SKIP TO CH200. |
+---+

                                                                HELP AVAILABLE

CH196.
CH195 Pre-K
SPEDSVCS
When a child with a disability or developmental delay receives special education and/or related services sponsored through your local education agency – that is, the school system – these services are initiated after a diagnosis of condition, or professional evaluation of the child, and development of an IEP, or an IFSP, which is discussed with and signed by the parent.

Is {CHILD/TWIN} receiving special education services related to either an IEP, or an IFSP?

YES…..…………………………..1
NO...2(CH200)
REFUSED..RF(CH200)
DON'T KNOW..DK(CH200)

CH197.
SPEDFROM
OSEP
Where does {CHILD}/{TWIN} currently receive {his/her} special education services from?
CODE ALL THAT APPLY

IN SCHOOL…………………………..1
CHILD CARE CENTER……………..2
AT HOME……….……………………3
IN A CLINICIAN'S OFFICE…………4
SOMEWHERE ELSE………………..5
   *Specify_____*__91
REFUSED……………………………RF
DON'T KNOW……………………….DK

NEW-Zuckerman

CH198.
SPLEDHRS
On average, how many hours per week does {CHILD/TWIN} now receive special education services?
|__|__|
ENTER NUMBER OF HOURS PER WEEK.

DON'T KNOW…………………………………….DK

REFUSED………………………………………….RF

CH200. READ FIRST TIME AND AS NECESSARY:

CH200 Pre-K

Mod for K-Zuckerman, Arcia

MOBILITY, DEVDLAY, EPILEPSY, HEARTDEF, MENTAL, AUTISM, OPPDEF, ADHD, DIABETES ANEMIA, BLOODDIS, URINTRCT, ALLERGY, LACTOSE, OTHALRGY, FOODALG, SKINCOND, OTHRMED

Since {CHILD/TWIN} turned 5 years old, has a doctor ever told you that {CHILD/TWIN} has the following conditions? Does {he/she} have…

	Yes	No	Refused	Don't Know
a. A problem with mobility such as cerebral palsy?	☐	☐		
b. Another developmental delay?	☐	☐		
c. Epilepsy or seizures?	☐	☐		
d. A heart defect?	☐	☐		
e. Mental retardation?	☐	☐		
f. Autism or PDD?	☐	☐		
g. Oppositional Defiant disorder?	☐	☐		
h. ADHD?	☐	☐		
i. Diabetes?	☐	☐		
j. Anemia?	☐	☐		
k. A blood disease?	☐	☐		
l. A urinary tract infection?	☐	☐		

m. Allergies?... ☐ ☐

.... ☐ ☐

n. A lactose intolerance?.. ☐ ☐

.... ☐ ☐

o. Other food allergy or sensitivity such as to peanuts?.... ☐ ☐ ☐

.... ☐

p. Problem with non-food allergies, such as to dust,
    animals, or medicine?... ☐ ☐

.... ☐ ☐

q. A skin condition?... ☐ ☐

.... ☐ ☐

r. Another chronic medical problem?............................. ☐ ☐

.... ☐ ☐

Specify_____

**New ordering for question - Old lettering
   updated above: Reference to old lettering →
   a, b, c, d, e, h, i, j, l, m, n, o, p, f, g, k, q, r.**

CH205.   Is {CHILD/TWIN}'s hearing loss in the right ear, the left ear, or both?
CH205 Pre-K

                    RIGHT EAR...1
                    LEFT EAR...2
                    BOTH..3
                    HEARING LOSS HAS BEEN CORRECTED.......................4
                    REFUSED..RF
                    DON'T KNOW..DK

CH210.   Does {CHILD/TWIN} have any impairment or health problem that requires {him/her} to use
CH210 Pre-K   special equipment, such as a brace, a wheelchair, or corrective shoes? Do not include
                ordinary eyeglasses.

                    YES...1
                    NO...2
                    REFUSED..RF
                    DON'T KNOW..DK

CH210a.   Does {CHILD/TWIN} use a hearing aid?
HEARAID

OSEP
                    YES...1
                    NO...2
                    REFUSED..RF
                    DON'T KNOW..DK

ECLS-K   CH211.
          EYESGHT
                    Is {CHILD/TWIN}'s eyesight….

                    Correctable with glasses, …………………………1
                    Improvable with glasses, or……………………..2
                     Not correctable with glasses?…………………..3
                    REFUSED……………………………………… RF
                    DON'T KNOW…………………………………….DK

CH212.   Does {CHILD/TWIN} wear glasses?
CH215 Pre-K

                        YES...1
                        NO..2
                        REFUSED..RF
                        DON'T KNOW...DK

CH213. Has {CHILD/TWIN} ever had a problem with stuttering?
STUTTER

NIH/NIDCD   YES...1
                        NO..2 (CH220BX)
                        REFUSED...RF (CH220BX)
                        DON'T KNOW...DK (CH220BX)

CH214a. In years and months, at what age did the stuttering begin?
STUTTBEG
        ENTER YEARS (range 0-7) AND MONTHS (range 0-11)

NIH/NIDCD   REFUSED..RF
                       DON'T KNOW...DK

CH214b. In years and months, when did the stuttering stop?
STUTTEND

NIH/NIDCD   ENTER YEARS (range 0-7) AND MONTHS (range 0-11).

                        HAS NOT STOPPED...95
                        REFUSED..RF
                        DON'T KNOW...DK

+---+
| **CH220BX** |
| IF (THE FOLLOWING VARIABLES IN CH200) MOBILITY, DEVDLAY, |
| EPILEPSY, HEARTDEF, MENTAL, AUTISM, OPPDEF, ADHD, |
| DIABETES, BLOODDIS, OTHRMED= 1 OR CH210=1, ASK CH220. |
| ELSE, GO TO CH242BX. |
+---+

Ask only if any disability has been diagnosed.

HELP AVAILABLE

CH220.

CH220 Pre-K
SPEECHTH
OCCUPTH
PHYSTH
VISNSRV
HEARSRV
SOCWKSRV
PSYCHSRV
HOMEVIS
PRNTSUP
SPECCLAS
TUTOR
BRAILLE
SIGNLANG

I'm going to read a list of services. For each service, please tell me if {CHILD/TWIN} or your family has received this service to help with {CHILD/TWIN}'s special needs. Since {CHILD/TWIN} turned 5 years old, has anyone in your household ever received…

	Yes	No	Refused	Don't Know
a. Speech or language therapy?.....................................	☐	☐		
b. Occupational therapy...	☐	☐		
c. Physical therapy?..	☐	☐		
d. Vision services?...	☐	☐		
e. Hearing/audiological services?....................................	☐	☐		

PROBE: This does not include a temporary
loss of hearing due to a cold or congestion.

f. Social work services?..	☐	☐		
g. Psychological services?...	☐	☐		
h. Home visits?..	☐	☐		
i. Parent support or training?..	☐	☐		
j. Special classes with other children, some or all or whom also had special needs?...............................	☐	☐		
k. Private tutoring or schooling for learning problems?..	☐	☐		
l. {*Ask only if CH194 = 1 (SIGHT PROBLEM)*} Instruction in braille?..	☐	☐		
m. {*Ask only if CH191 = 1 (HEARING PROBLEM)*} Instruction in sign language, cued speech, ASL, or TOCO?	☐	☐	☐	☐

CH225BX
IF ANY OF CH220a-m = 1 (CHILD/TWIN RECEIVES SERVICES), GO
TO CH235. ELSE, GO TO CH242BX.

CH235.   About how many {total} hours of service{s} <u>per month</u> are now received {for <u>all</u> services}?

Answer must be in range from 1 up to 80.

|___|___|
NUMBER OF HOURS

REFUSED...RF
DON'T KNOW..DK

CH236.   Is {CHILD/TWIN} currently participating in an early intervention program or regularly
LCSCHSRV receiving any services for {his/her} condition{s} from…
HLTHAGCY
HLTHPROV
SRVOTH

	Yes	No	Refused	Don't Know
a. Your local school district?..	☐	☐	☐	☐
b. A state or local health or social service agency?	☐	☐	☐	☐
c. A doctor, clinic, or other health care provider?	☐	☐	☐	☐

d. Some other source? ENTER OTHER (Specify) [*What is that other source of early intervention services for your child?]* _____)

CH242BX
IF ANY OF CH220a-m [SPEECHTH, OCCUPTH, PHYSTH, VISNSRV, HEARSRV, SOCWKSRV, PSYCHSRV, HOMEVIS, PRNTSUP, SPECCLAS, TUTOR, BRAILLE, SIGNLANG] = 1 (CHILD RECEIVES SERVICES), GO TO CH342BX. ELSE, GO TO CH242 [EVALSPND].

CH242.   Since {CHILD/TWIN} turned 5 years old, has anyone suggested that you get
CH300 Pre-K {CHILD/TWIN} evaluated for a possible special condition or need?
EVALSPND

HELP SCREEN TEXT: This includes special conditions related to learning, paying attention, speaking, and understanding.

YES...1
NO..2
REFUSED...RF
DON'T KNOW..DK

CH342BX
CH342BX
IF TWIN IN HOUSEHOLD AND NOT YET ASKED ABOUT, RETURN TO SECTION SE.

GO TO SECTION 9- FH

Section 9-FH: FAMILY HEALTH

Now I have some questions about your health. In general, would you say that <u>your</u> health is…

FH010.

Excellent,...1
Very good,...2
Good, ...3
Fair, or...4
Poor? 5
REFUSED...RF
DON'T KNOW...DK

FH080.   In the past 12 months, have you talked with a psychiatrist, psychologist, doctor, or
DISCPROB   counselor for any emotional or psychological problem?

YES..1
NO..2
REFUSED...RF
DON'T KNOW...DK

FH090.   In a typical week, on how many days do <u>you</u> get exercise that causes rapid breathing and
FH281   a fast heartbeat for 30 continuous minutes or more?
Pre-K

MDAYSEXER

Answer must be in range from 0 up to 7.

|__|__|
ENTER NUMBER OF DAYS PER WEEK.
REFUSED...RF
DON'T KNOW...DK

FH100.   Now I have some questions about when you were born. When <u>you</u> were born, did <u>you</u>
MOMSBW   weigh more than 5 ½ pounds?

YES..1 Go To FH110
NO..2
REFUSED...RF   Go to FH110
DON'T KNOW...DK   Go to FH110

FH105.   Did you weigh more than 3 pounds?
MOM3LBS

YES..1
NO..2
REFUSED...RF

DON'T KNOW...DK

FH110.   Were you born more than 3 weeks before you were due? (Probe if necessary: Were you
              born at less than 37 weeks gestation?

MOMPRIMI

              YES..1
              NO..2
              REFUSED..RF
              DON'T KNOW..DK

FH115   Are you a twin, triplet, or child born as part of a multiple birth?
.
MOMTWIN

              NO..1
              YES, A TWIN...2
              YES, A TRIPLET…………………………………………….3
              YES, HIGHER ORDER MULTIPLE BIRTH (4 OR MORE)…4
              REFUSED..RF
              DON'T KNOW..DK

GO TO SECTION 10-MH.

Section 10-MH: MARRIAGES AND PARTNER RELATIONSHIPS

MH002PRE   Next are a few questions about your marital history.

PRESS "1" AND THEN ENTER TO CONTINUE.

MH003BX

IF SAME RESPONDENT AS K '06 AND IF K '06 MH005=1 (MARRIED),
2 (SEPARATED), 3 (DIVORCED), OR 5 (NEVER MARRIED), GO TO
MH004.
ELSE GO TO MH005.

MH004.   During our last interview about a year ago, you said that you {were married/were
MSSAME   separated/were divorced/ had never been married}. Is this information still correct?

YES...1   (MH017BX)
NO...2
REFUSED...RF   (MH017BX)
DON'T KNOW...DK

MH005.   Are you now…
Married,...1
Separated,...2
Divorced,...3
Widowed, or...4
Have you never been married?..5
REFUSED...RF
DON'T KNOW...DK

MH017BX

IF RESPONDENT IS THE CHILD'S BIOLOGICAL MOTHER (AS FLAGGED IN SECTION IN) AND THE BIOLOGICAL FATHER IS NOT CURRENTLY LIVING IN HOUSEHOLD (AND HE WAS NOT DEAD AT THE TIME OF THE K '06 INTERVIEW):

IF FS010 = 3, 4, OR 5 (DAD IS NOT IN HH BECAUSE OF SCHOOL OR WORK), AUTOCODE MH018 = 1, AND GO TO MH022.

IF FS010 = 1, 2, 7, OR 91 (DAD IS NOT IN HH BECAUSE OF DIVORCE, JAIL, OR OTHER), GO TO MH018.

IF FS010 = 6 (DAD DECEASED), AUTOCODE MH018 = 2, AND GO TO SECTION RI.

ELSE IF RESPONDENT IS BIOLOGICAL MOTHER AND BIOLOGICAL FATHER LIVES IN HH, AUTOCODE MH018=1 AND GO TO MH020BX.

ELSE, GO TO SECTION RI.

MH018.　　Is {CHILD}'s {and {TWIN}'s} biological father still living?

　　　　　　YES...1
　　　　　　NO...2
　　　　　　REFUSED..RF
　　　　　　DON'T KNOW...DK

MH020BX

IF MH018 =1 AND (MARRIED AT K '06 OR MH005 =1), GO TO MH022.

ELSE IF MH018= 2 AND ((MARRIED AT K '06 OR MH005 =1), AUTOCODE MH022 =2 AND GO TO SECTION RI.

ELSE GO TO SECTION RI.

MH022.　　　　Are you now married to {CHILD's {and TWIN'S}} biological father?
MARDAD

　　　　　　YES...1
　　　　　　NO...2
　　　　　　REFUSED..RF
　　　　　　DON'T KNOW...DK

GO TO SECTION 11-RI.

Section 11-RI: RESPONDENT INFORMATION

RI001PRE. The next questions are about you and your background.

RI010BX

IF RI010 (RESPBORN) AT K '06 ^= 1, 2, OR 3 OR IF K'06 RESPONDENT IS NOT THE SAME AS K'07 RESPONDENT, GO TO RI010.

ELSE GO TO RI015BX.

RI010.   In what country were you born?

UNITED STATES (50 STATES OR DC)....................1   (RI025BX)
U.S. TERRITORIES: PUERTO RICO, GUAM,
AMERICAN SAMOA, U.S. VIRGIN ISLANDS,
MARIANA ISLANDS, OR SOLOMON ISLANDS.......2   (RI015)
ENTER OTHER (SPECIFY) [*Where were you
born?*] _____
SOME OTHER COUNTRY.......................................3   (RI015)
ENTER OTHER (SPECIFY) [*What country were
you born in?]*
REFUSED..RF   (RI015)
DON'T KNOW...DK   (RI015)

RI015BX

IF RESPONDENT SAME AS K'06 RESPONDENT AND RI015 (RAGETOUS) AT K '06 NE 1 OR MISSING, GO TO RI015

ELSE GO TO RI017BX.

RI015.   How old were you when you first moved to the {United States/50 states or the District of Columbia}?

DISPLAY "United States" IF RI010 = 3, RF, or DK. DISPLAY "50 states or the District of Columbia" IF RI=2.

ENTER '0' IF LESS THAN 1 YEAR OLD.

Answer must be in range from 0 up to 100.

|___|___|
 AGE

REFUSED...RF
DON'T KNOW..DK

```
┌─────────────────────────────────────────────────────────────────┐
│                         RI017BX                                    │
│                                                                    │
│ IF RESPONDENT IS THE SAME AS THE K'06 RESPONDENT AND RI020         │
│ (RESPCITZ) AT K '06 = 1 OR 2, GO TO RI025BX.                       │
│                                                                    │
│ ELSE IF (RESPONDENT IS THE SAME AS THE PK RESPONDENT AND           │
│ RESPBORN RI010 (RESPBORN) AT K'06 = 3) OR RI010=3, DK, OR RF, GO TO │
│ RI020.                                                             │
│                                                                    │
│ ELSE, GO TO RI025BX.                                               │
└─────────────────────────────────────────────────────────────────┘
```

Ask RI020 only if respondent was non-citizen at K'06:
RI020.   Are you a citizen of the United States?

                         YES...1
                         NO..2
                         REFUSED...RF
                         DON'T KNOW...DK

```
┌─────────────────────────────────────────────────────────────────┐
│                         RI025BX                                    │
│                                                                    │
│ ASK RI025 IF RESPONDENT IS DIFFERENT FROM K '06 RESPONDENT, OR IF  │
│          RI025 IS MISSING AT 24-MONTH, PK, AND K '06.              │
│                                                                    │
│                    ELSE, GO TO RI045.                             │
└─────────────────────────────────────────────────────────────────┘
```

RI025.   What is your primary language?
               [PROBE: What language do you speak the most?]

                         ENGLISH..1
                         SPANISH..2
                         ENGLISH AND SPANISH EQUALLY................................3
                         OTHER..4
                         ENTER OTHER (SPECIFY) [*What is your primary language?]*_____
                         REFUSED...RF
                         DON'T KNOW..DK

RI045.   {Now I have a few questions about your current education, employment, and job training.}

What is the highest grade or year of school that you have completed?

Display Instructions: Display fill only when RI010 or RI015 or RI020 is asked.

NO FORMAL SCHOOLING...0 (RI070)
1ST GRADE...1
2ND GRADE..2
3RD GRADE..3
4TH GRADE...4
5TH GRADE...5
6TH GRADE...6
7TH GRADE...7
8TH GRADE...8
9TH GRADE...9
10TH GRADE..10
11TH GRADE..11
12TH GRADE BUT NO DIPLOMA 12
HIGH SCHOOL DIPLOMA/EQIVALENT...................................13 (RI047)
VOC/TECH PROGRAM AFTER HIGH SCHOOL BUT
    NO VOC/TECH DIPLOMA...14
VOC/TECH DIPLOMA AFTER HIGH SCHOOL........................15
SOME COLLEGE BUT NO DEGREE 16
ASSOCIATE'S DEGREE...17 (RI070)
BACHELOR'S DEGREE..18 (RI070)
GRADUATE OR PROFESSIONAL SCHOOL BUT
    NO DEGREE...19 (RI070)
MASTER'S DEGREE (MA, MS)..20 (RI070)
DOCTORATE DEGREE (PHD, EDD).......................................21 (RI070)
PROFESSIONAL DEGREE AFTER BACHELOR'S
    DEGREE (MD, DDS, JD, LLB, ETC.)...................................22 (RI070)
REFUSED..RF (RI070)
DON'T KNOW..DK (RI070)

RI046.   Do you have a high school diploma or its equivalent, such as a GED?

YES..1
NO...2 (RI070)
REFUSED...RF (RI070)
DON'T KNOW....................................DK (RI070)

RI047.   Which do you have, a high school diploma or a GED?

HIGH SCHOOL DIPLOMA...................................1
GED..2
REFUSED...RF
DON'T KNOW...DK

RI070.   During the past week, did you work at a job or business for pay?

IF RESPONDENT IS SELF-EMPLOYED, CODE AS YES (1).
IF RESPONDENT IS RETIRED OR UNABLE TO WORK, CODE AS NO (2).

YES...1 (RI105)
NO...2
REFUSED...RF
DON'T KNOW..DK

RI075.   Were you on leave or vacation from a job or business?

YES...1
NO...2 (RI160)
REFUSED...RF (RI160)
DON'T KNOW..DK (RI160)

RI105.   How many jobs do you have now?
Answer must be in range from 1 up to 9.

Interviewer may override range UP TO 20.

|___|
NUMBER OF JOBS

REFUSED...RF
DON'T KNOW..DK

RI110.   About how many total hours per week do you usually work for pay (counting all jobs)?

Display "counting all jobs" only if RI105 does not equal 1.

IF HOURS VARY, PROBE FOR AVERAGE HOURS PER WEEK.
Answer must be in range from 0 up to 60.

Interviewer may override range up to 99.

|___|___|
NUMBER OF WEEKLY HOURS

REFUSED...RF
DON'T KNOW..DK

RI115.   {Counting all jobs about/About} how much do you earn before taxes and other deductions?
Display "counting all jobs" only if RI105 does not equal 1. Else display "About".

Answer must be in range from .01 up to 999999.99.

$|__|__|__| , |__|__|__| . |__|__|

AMOUNT

REFUSED..RF
DON'T KNOW..DK

|__|__|
UNITS

PER HOUR...1
PER DAY..2
PER WEEK...3
PER BI-WEEKLY (EVERY 2 WEEKS)...............................4
PER MONTH...5
PER YEAR..6
OTHER...91
ENTER OTHER (SPECIFY) [*What is the unit for
earnings?*]_____

RI125.   Which of the following best describes the hours you <u>usually</u> work {at your main job}?
DISPLAY "at your main job" only if RI105 does not equal 1.

SHOW CARD RI-1

A regular daytime shift - any time between 6 A.M. and 6 P.M.,................1
A regular evening shift - any time between 2 P.M. and Midnight..............2
A regular night shift - any time between 9 P.M. and 8 A.M.,.....................3
A rotating shift – one that changes periodically from days to
evenings or nights,...4
A split shift – one consisting of two distinct periods each day, or..............5
Some other schedule?..91
        (SPECIFY)_____
                REFUSED..RF
                DON'T KNOW..DK

RI135.   For whom do you work?
            PROBE FOR: NAME OF THE COMPANY, BUSINESS, ORGANIZATION, OR OTHER
            EMPLOYER. IF MORE THAN ONE CURRENT JOB, ASK ABOUT THE ONE AT WHICH THE
            PERSON SPENDS THE MOST TIME.

            NAME OF COMPANY _____

                REFUSED..RF
                DON'T KNOW..DK

RI140.　　What kind of business or industry is this?
　　　　　　PROBE: What do they make or do? For example, TV and radio manufacturing, retail shoe store, state labor department, farming.

　　　　　　　　TYPE OF INDUSTRY _____

　　　　　　　　　　　REFUSED...RF
　　　　　　　　　　　DON'T KNOW..DK

　　　　　　What kind of work are you now doing?
RI150.
　　　　　　PROBE: What is your job called? For example, electrical engineer, stock clerk, typist, farmer.

　　　　　　　　JOB TITLE _____

　　　　　　　　　　　REFUSED...RF
　　　　　　　　　　　DON'T KNOW..DK

RI155.　　What are your most important activities or duties at this job? What do you actually do at this job?

　　　　　　PROBE: For example, typing, keeping account books, filing, selling cars, operating a printing press, finishing concrete.

　　　　　　　　IMPORTANT DUTIES _____

　　　　　　　　　　　REFUSED...RF
　　　　　　　　　　　DON'T KNOW..DK

GO TO SECTION SI.

RI160.　　Have you been actively looking for work in the past 4 weeks?

　　　　　　　　　　　YES...1
　　　　　　　　　　　NO..2
　　　　　　　　　　　REFUSED...RF
　　　　　　　　　　　DON'T KNOW..DK

RI170.　　　What were you doing most of last week? Would you say…

        Keeping house or caring for children,...................................1
        Going to school,..2
        Retired,..3
        Unable to work, or..4
        Something else?..91
         (SPECIFY)_____
        REFUSED..RF
        DON'T KNOW...DK

RI175.　　　Could you have taken a job last week if one had been offered?

        YES...1
        NO...2
        REFUSED..RF
        DON'T KNOW...DK

GO TO SECTION 12-SI

Section 12-SI: SPOUSE/PARTNER INFORMATION

```
SI005PREBX
IF FS037 = 1 (SPOUSE OR PARTNER IN HH), GO TO SI005PRE.
OTHERWISE GO TO SECTION WP.
```

SI005PRE   Now I have a few questions about {NAME}'s current education, employment, and job training.

{NAME} = spouse or partner's name from section FS. If unknown, use "your spouse or partner."

                                                                                    HELP AVAILABLE
SI015.   What is the highest grade or year of school that {NAME} has completed?

    NO FORMAL SCHOOLING...0 (SI040)
    1ST GRADE...1
    2ND GRADE..2
    3RD GRADE..3
    4TH GRADE..4
    5TH GRADE..5
    6TH GRADE..6
    7TH GRADE..7
    8TH GRADE..8
    9TH GRADE..9
    10TH GRADE...10
    11TH GRADE...11
    12TH GRADE BUT NO DIPLOMA...................................12
    HIGH SCHOOL DIPLOMA/EQUIVALENT............................13 (SI017)
    VOC/TECH PROGRAM AFTER HIGH SCHOOL
      BUT NO VOC/TECH DIPLOMA......................................14
    VOC/TECH DIPLOMA AFTER HIGH SCHOOL...............................15
    SOME COLLEGE BUT NO DEGREE...16
    ASSOCIATE'S DEGREE..17 (SI040)
    BACHELOR'S DEGREE...18 (SI040)
    GRADUATE OR PROFESSIONAL SCHOOL BUT NO DEGREE
    ....19 (SI040)
    MASTER'S DEGREE (MA, MS) 20 (SI040)
    DOCTORATE DEGREE (PHD, EDD) 21 (SI040)
    PROFESSIONAL DEGREE AFTER BACHELOR'S DEGREE
      (MD, DDS, JD, LLB, ETC.) 22 (SI040)
    REFUSED...RF (SI040)
    DON'T KNOW..DK (SI040)

If above information is the same as in the K '06 interview, skip to SI020.

<div align="right">HELP AVAILABLE</div>

SI016. Does {he/she} have a high school diploma or its equivalent, such as a GED?

                 YES...1
                 NO...2 (SI040)
                 REFUSED...RF (SI040)
                 DON'T KNOW..DK (SI040)

SI017. Which does {he/she} have, a high school diploma or a GED?

                 HIGH SCHOOL DIPLOMA...1
                 GED..2
                 REFUSED...RF
                 DON'T KNOW..DK

SI040.   <u>During the past week</u>, did {NAME} work at a job or business for pay?

          [IF SPOUSE/PARTNER IS SELF-EMPLOYED, CODE AS YES (1).
          IF SPOUSE/PARTNER IS RETIRED OR UNABLE TO WORK, CODE AS NO (2).]

                   YES...1 (SI050)
                   NO..2
                   REFUSED...RF
                   DON'T KNOW...DK

SI045.   Was {he/she} on leave or vacation from a job or business?
                   YES...1
                   NO..2 (SI110)
                   REFUSED...RF (SI110)
                   DON'T KNOW...DK (SI110)

SI050.   How many jobs does {NAME} have now?
Answer must be in range from 0 up to 9.

Interviewer may override range up to 20.

                   |___|
                   NUMBER OF JOBS

                   REFUSED...RF
                   DON'T KNOW...DK

HELP AVAILABLE

SI055.   About how many total hours per week does {he/she} usually work for pay {counting all jobs}?

          [IF HOURS VARY, PROBE FOR AVERAGE HOURS PER WEEK.]
Answer must be in range from 0 up to 60.

Interviewer may override range up to 99.

                   |___|___|
                   ENTER WEEKLY HOURS

                   REFUSED...RF
                   DON'T KNOW...DK

SI056.   {Counting all jobs about/About} how much does {NAME} earn before taxes and other deductions? Answer must be in range from .01 up to 999999.99.

$|__|__|__| , |__|__|__| . |__|__|
  ENTER DOLLAR AMOUNT

REFUSED...(SI060)
DON'T KNOW...(SI060)

SI057.

|__|__|
ENTER UNIT

PER HOUR...1
PER DAY...2
PER WEEK..3
PER BI-WEEKLY (EVERY 2 WEEKS)...............................4
PER MONTH..5
PER YEAR...6
OTHER...91
ENTER OTHER (SPECIFY) [*What is the unit of pay?]*.........
REFUSED...RF
DON'T KNOW..DK

                                                                    HELP AVAILABLE
SI060.   Which of the following best describes the hours {NAME} usually works {at {his/her} main job}?

          SHOW CARD SI-1

                    A regular daytime shift—any time between 6 A.M. and 6 P.M.,1
                    A regular evening shift—any time between 2 P.M. and Midnight   2
                    A regular night shift—any time around 9 P.M. and 8 A.M.,.3
                    A rotating shift—one that changes periodically from days to evenings or nights,
                   4
                    A split shift—one consisting of two distinct periods each day, or   5
                    Some other schedule..91
                    ENTER OTHER (SPECIFY) [*What are the hours {he/she} usually works?*]
                    REFUSED...RF
                    DON'T KNOW..DK

SI075.   For whom does {NAME} work?
          PROBE FOR: NAME OF THE COMPANY, BUSINESS, ORGANIZATION, OR OTHER
          EMPLOYER. IF MORE THAN ONE CURRENT JOB, ASK ABOUT THE ONE AT WHICH THE
          SPOUSE/PARTNER SPENDS THE MOST TIME.

          NAME OF COMPANY _____

                    REFUSED...RF
                    DON'T KNOW..DK

SI080.   What kind of business or industry is this?

PROBE: What do they make or do? For example, TV and radio manufacturing, retail shoe store, state labor department, farming.

TYPE OF INDUSTRY _____

REFUSED..RF
DON'T KNOW...DK

SI090.   What kind of work is {he/she} now doing?

PROBE: For example, electrical engineer, stock clerk, typist, farmer.

JOB TITLE _____

REFUSED..RF
DON'T KNOW...DK

SI095.   What are {his/her} most important activities or duties at this job? What does {he/she} actually do at this job?

PROBE: For example, typing, keeping account books, filing, selling cars, operating a printing press, finishing concrete.

IMPORTANT DUTIES _____

REFUSED..RF
DON'T KNOW...DK

+--+
| **SI90BX** |
| GO TO SECTION WP. |
+--+

HELP AVAILABLE

SI110.   Has {NAME} been actively looking for work in the past 4 weeks?
YES...1
NO..2
REFUSED..RF
DON'T KNOW...DK

SI121.   What was {he/she} doing most of last week? Would you say…
Keeping house or caring for children,................................1
Going to school,..2

Retired,...3
Unable to work, or..4
Something else?..91
ENTER OTHER (SPECIFY) [*What was {he/she} doing most of last week?*]
_____
REFUSED...RF
DON'T KNOW...DK

SI126.   Could {he/she} have taken a job last week if one had been offered?

YES...1
NO..2
REFUSED...RF
DON'T KNOW...DK

DELETE SI150 **RFSAQ** & SI151 **ENGORSPAN**

GO TO SECTION WP.

Section 13-WP: WELFARE AND OTHER PUBLIC ASSISTANCE

HELP AVAILABLE

WP010. Now, I have a few questions about government benefits you may receive.

At any time since {CHILD} {and {TWIN}} turned 5 years old, have you {or anyone else in your household} received...

     a. Food Stamps?

     b. TANF {or {STATE NAME FOR TANF} or welfare?

     c. Medicaid benefits?

DISPLAY INSTRUCTIONS:
Display state name for TANF, if available.

```
YES.....................................................................................1
NO.......................................................................................2
REFUSED.........................................................................RF
DON'T KNOW...................................................................DK
```

WP012BX
IF WP010a = 1 (RECEIVED FOOD STAMPS), GO TO WP015.
ELSE, GO TO WP017BX.

WP015. For how many months since {CHILD} {and {TWIN}} turned 5 years old, did you {or any member of your household} receive Food Stamps?

Answer must be in range from 0 up to 36.

```
|___|___|
NUMBER OF MONTHS

REFUSED.........................................................................RF
DON'T KNOW...................................................................DK
```

WP017BX
IF WP010b = 1 (RECEIVED TANF), GO TO WP019. ELSE, GO TO WP021BX.

WP019.   For how many months since {CHILD} {and {TWIN}} turned 5 years old, did you {or any
          member of your household} receive TANF {or {STATE NAME FOR TANF}} or welfare?

Answer must be in range from 0 up to 36.

                    |___|___|
                    NUMBER OF MONTHS
                    IF LESS THAN 1, ENTER '0'.

                    REFUSED...RF
                    DON'T KNOW..DK

WP021BX
IF WP010c = 1 (RECEIVED MEDICAID), GO TO WP023. ELSE, GO TO
WP047BX.

WP023.   For how many months since {CHILD} {and {TWIN}} turned 5 years old, did you {or any
          member of your household} receive Medicaid benefits?

Answer must be in range from 0 up to 36.

                    |___|___|
                    NUMBER OF MONTHS
                    IF LESS THAN 1, ENTER '0'.

                    REFUSED...RF
                    DON'T KNOW..DK

WP047BX
IF WP047 AT K'06 = 3 (DK) OR 4 (RF) OR MISSING, GO TO WP047.
ELSE, GO TO WP059BX.

WP047. Children cannot participate in WIC once they reach their 5th birthday. Did {CHILD}{or {TWIN}} participate in WIC up to {his/her/their} 5th birthday?

YES ……………1
NO ……………..2
REFUSED …….RF
DON'T KNOW . DK

```
                         WP059BX

IF NO TWIN IN HOUSEHOLD AND THE NUMBER OF CHILDREN AGE
5 OR YOUNGER IN HOUSEHOLD IS >= 2, GO TO WP060.

ELSE IF TWIN IN HOUSEHOLD AND THE NUMBER OF CHILDREN
AGE 5 OR YOUNGER IN HOUSEHOLD IS >= 3, GO TO WP060.

ELSE IF CHILD AGE IS GREATER THAN 5 AND THE NUMBER OF
CHILDREN AGE 5 OR YOUNGER IN HOUSEHOLD IS >= 1, GO TO
WP060.

ELSE, GO TO WP060BX.
```

WP060.   In the last 30 days, did you use WIC vouchers to buy food for any other child in your
          household?

                    YES...1
                    NO...2
                    REFUSED..RF
                    DON'T KNOW..DK

```
        WP060BX

IF CHILD IS IN KINDERGARTEN (SE030 = 2 OR SE032 = 2) AND NOT
HOMESCHOOLED (SE015 NE 1), GO TO WP065.

ELSE, GO TO WP075.
```

WP065.   Does {CHILD/TWIN}'s school offer lunch for {CHILD}'s kindergarten class?

USDA

                YES……………………………..1
                NO………………………………2   (WP070BX)
                DON'T KNOW………………….DK (WP070BX)
                REFUSED …………………….REF (WP070BX)

WP066.   Does {CHILD/TWIN} usually receive a complete lunch offered at school?

                PROBE: By complete school lunch, I mean a complete meal such as a salad, soup, a
ECLS-K   sandwich, or a hot meal that is offered each day at a fixed price, not just milk, snacks, ice
                cream, or a lunch {he/she} brought from home.

                    YES...1
                    NO...2   (WP070BX)
                    REFUSED..RF   (WP070BX)
                    DON'T KNOW……………………………………DK   (WP070BX)

ECLS-K   WP067.   Does {CHILD/TWIN} receive free or reduced price lunches at school?

YES...1
NO..2 (WP069)
REFUSED...RF (WP069)
DON'T KNOW………………………………...…...............…DK (WP069)

ECLS-K WP068. Are these lunches free or reduced price?

FREE………………………………………………1
REDUCED PRICE………..............................2
REFUSED...RF
DON'T KNOW…………………………………….DK

ECLS-K WP069.
LNCHRCVD During the last five days {CHILD/TWIN} was in school, how many complete school lunches did {he/she} receive?

Answer must be in range of 0 to 5.

|__| ENTER NUMBER OF LUNCHES
REFUSED...RF
DON'T KNOW…………………………………….DK

USDA WP070. Does {CHILD/TWIN}'s school offer breakfast for {CHILD}'s **kindergarten class**?

YES……………………………….1
NO……………………………….2   (WP072BX)
DON'T KNOW………………….DK   (WP072BX)
REFUSED …………………..RF   (WP072BX)

ECLS-K WP071. Does {CHILD/TWIN} usually receive a breakfast provided by the school?

YES...1
NO..2   (WP072BX)
REFUSED...RF   (WP072BX)
DON'T KNOW…………………………………………….....DK   (WP072BX)

WP072.
BFSTRCVD During the last five days {CHILD/TWIN} was in school, how many school breakfasts did {he/she} receive?

Answer must be in range of 0 to 5.

ECLS-K |__| ENTER NUMBER OF BREAKFASTS

DON'T KNOW…………………DK
REFUSED …………………..RF

WP075. READ FIRST TIME AND AS NECESSARY:
WP070 Since {CHILD} {and {TWIN}} turned 5 years old, have you (or any member of your household)
Pre-K received any of the following other sources of household income or support?

		Yes	No	Refused	Don't Know
a.	Unemployment Insurance...	☐	☐	☐	☐
b.	Child support..	☐	☐	☐	☐
c.	SSI or SSDI...	☐	☐	☐	☐
d.	Social Security Retirement or Survivor's benefits..	☐	☐	☐	☐
e.	Loan repayments – for example, from friends, relatives, and so forth...	☐	☐	☐	☐
f.	Payments for providing foster care....................................	☐	☐	☐	☐
g.	Money given to the family...	☐	☐	☐	☐
h.	Another source of income not from a job?..........................	☐	☐	☐	☐

Specify_____

GO TO SECTION HI.

Section 14-HI: HOUSEHOLD INCOME AND ASSETS

HI005.   Now I have a few questions about your household.

Including yourself, how many adults contribute to your household income?

Answer must be in range from 1 up to 50.

|___|___|
NUMBER OF ADULTS

REFUSED..RF
DON'T KNOW...DK

HELP AVAILABLE

HI010.   In studies like this, households are sometimes grouped according to income. What was the total income of all persons in your household over the past year, including salaries or other earnings, interest, retirement, and so on for all household members?

Was it...

$25,000 or less, or..1
More than $25,000?...2
REFUSED...RF (SECTION NQ)
DON'T KNOW..DK (SECTION NQ)

DISPLAY INSTRUCTIONS:
If HI010=1 ($25,000 or less), display response codes 1-5 ($5,000 or less - $20,001 to 25,000);
Else if HI010=2 (More than $25,000), display response codes 6-13 ($25,001 to $30,000 to $200,001 or more).

HI015.   Was it . . .

$5,000 or less,..1
$5,001 to $10,000,..2
$10,001 to $15,000,...3
$15,001 to $20,000, or...4
$20,001 to $25,000?..5
$25,001 to $30,000,...6
$30,001 to $35,000,...7
$35,001 to $40,000,...8
$40,001 to $50,000,...9
$50,001 to $75,000, ...10
$75,001 to $100,000,..11
$100,001 to $200,000, or..12
$200,001 or more?...13
REFUSED...RF (SECTION NQ)
DON'T KNOW..DK (SECTION NQ)

PROBE: Total income means <u>gross</u> income - that is, income <u>before</u> taxes are taken out.

HI017BX

IF FAMILY INCOME (HI015) IS BELOW 200% OF THE POVERTY THRESHOLD (PER CENSUS), BASED ON INCOME AND FAMILY SIZE, GO TO HI020. (NOTE: ECLS AND CENSUS INCOME CATEGORIES DO NOT MATCH UP PERFECTLY).

IF (# OF HOUSEHOLD MEMBERS = 2 AND HI015 < = 6) OR

(# OF HOUSEHOLD MEMBERS = 3 AND HI015 < = 7) OR

(# OF HOUSEHOLD MEMBERS = 4 AND HI015 < = 8) OR

(# OF HOUSEHOLD MEMBERS = 5 AND HI015 < = 9) OR

(# OF HOUSEHOLD MEMBERS = 6 AND HI015 < = 10) OR

(# OF HOUSEHOLD MEMBERS = 7 AND HI015 < = 10) OR

(# OF HOUSEHOLD MEMBERS = 8 AND HI015 < = 10) OR

(# OF HOUSEHOLD MEMBERS > = 9 AND HI015 < = 11)

OR HI015=DK OR RF, GO TO HI020.

ELSE, GO TO SECTION NQ.

HI020.   What was your total household income last year, to the nearest thousand?
ENTER TOTAL INCOME.

Probe: Total income means gross income - that is, income before taxes are taken out."

Answer must be in range from 1 up to 80000.

$|__|__|,|__|__|__|
  TOTAL INCOME

REFUSED...RF
DON'T KNOW..DK

GO TO SECTION NQ.

Section 15-NQ: NEIGHBORHOOD QUALITY/SAFETY

NQ005.　　　　These next questions are about your home and neighborhood.
　　　　　　　Have you moved since {CHILD}{and {TWIN}} {was/were} about five years old?

```
          YES.....................................................................1
          NO.......................................................................2    (Section HF)
          REFUSED.........................................................RF    (Section HF)
          DON'T KNOW.................................................DK    (Section HF)
```

NQ018.　　Do you consider your neighborhood very safe from crime, fairly safe, fairly unsafe, or very
　　　　　unsafe?

SHOW CARD NQ-1

```
          VERY SAFE.........................................................1
          FAIRLY SAFE......................................................2
          FAIRLY UNSAFE.................................................3
          VERY UNSAFE...................................................4
          REFUSED.........................................................RF
          DON'T KNOW...................................................DK
```

GO TO SECTION HF

HF020 BX

IF (# OF HOUSEHOLD MEMBERS = 2 AND HI015 <= 6) OR
(# OF HOUSEHOLD MEMBERS = 3 AND HI015 <= 7) OR
(# OF HOUSEHOLD MEMBERS = 4 AND HI015 <= 8) OR
(# OF HOUSEHOLD MEMBERS = 5 AND HI015 <= 9) OR
(# OF HOUSEHOLD MEMBERS = 6 AND HI015 <= 10) OR
(# OF HOUSEHOLD MEMBERS = 7 AND HI015 <= 10) OR
(# OF HOUSEHOLD MEMBERS = 8 AND HI015 <= 10) OR
(# OF HOUSEHOLD MEMBERS >= 9 AND HI015 <= 11)

OR HI015 = DK OR RF, GO TO HF020.

ELSE, GO TO PARENT ACASI INTERVIEW

HF020.   These next questions are about the food eaten in your household and whether you were
FOODRUN   able to afford the food you need.
FOODLAST
AFFORDBA I am going to read you several statements that people have made about their food
LOWCOST   situation. For these statements, please tell me whether the statement was <u>often</u> true,
BAAFFORD <u>sometimes true</u>, or <u>never</u> true for {you/your household} since {CHILD}{and {TWIN}} turned
             5 years old.

             [Was that <u>often</u> true, <u>sometimes</u> true, or <u>never</u> true for your household since {CHILD}{and
             {TWIN}} turned 5 years old?]

DISPLAY INSTRUCTIONS:
Display "we", "our", and "your household" if there is a household member, besides the respondent, who is
18 years of age or older. Else display "I", "my", and "you".

   SHOW CARD HF-1

		Often True	Some-times True	Never True	Refused	Don't Know
a.	{I/we} worried whether {my/our} food would run out before {I/we} got money to buy more..........	☐ ☐	☐ ☐			
b.	The food that {I/we} bought just didn't last, and {I/we} didn't have money to get more.	☐ ☐	☐ ☐			
c.	{I/We} couldn't afford to eat balanced meals..........	☐ ☐	☐ ☐			
d.	{I/We} relied on only a few kinds of low-cost food to feed {{CHILD}/the children} because {I was/we were} running out of money to buy food	☐ ☐	☐ ☐			
e.	{I/We} couldn't feed {{CHILD}/the children} a balanced meal because {I/we} couldn't afford that	☐ ☐	☐ ☐			

HF022.   Please tell me whether the following statement was <u>often</u> true, <u>sometimes</u> true, or <u>never</u> true for {you/your household} in the last 12 months.

{{CHILD} was/The children were} not eating enough because {I/we} just couldn't afford enough food.

[Was that <u>often</u> true, <u>sometimes</u> true, or <u>never</u> true for your household in the last 12 months?]

DISPLAY INSTRUCTIONS:
Display "we" and "your household" if there is a household member, besides the respondent, who is 18 years of age or older. Else display "I" and "you".

If there are other children younger than 18 in household besides {CHILD} (including TWIN), display "The children were"; Else, display "{CHILD} was".

                OFTEN TRUE..1
                SOMETIMES TRUE...2
                NEVER TRUE..3
                REFUSED..RF
                DON'T KNOW...DK

HF025.   In the last 12 months, did {you/you or other adults in your household} ever cut the size of your meals or skip meals because there wasn't enough money for food?

                YES...1
                NO..2 (HF035)
                REFUSED..RF (HF035)
                DON'T KNOW...DK (HF035)

HF030.   How often did this happen? Would you say…
                Almost every month,...1
                Some months, but not every month, or...............................2
                In only 1 or 2 months?..3
                REFUSED..RF
                DON'T KNOW...DK

HF035.   In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money to buy food?

                YES...1
                NO..2
                REFUSED..RF
                DON'T KNOW...DK

HF040.   In the last 12 months, were you ever hungry but didn't eat because you couldn't afford enough food?

                   YES...1
                   NO...2
                   REFUSED..RF
                   DON'T KNOW...DK

HF045.   In the last 12 months, did you lose weight because you didn't have enough money for food?
                   YES...1
                   NO...2
                   REFUSED..RF
                   DON'T KNOW...DK

+---+
| **HFO46BX** |
| HF022 = 1 or 2 or if HF025 = 1, or any of HF035-HF045 = 1 (ATE |
| LESS/WENT HUNGRY/LOST WEIGHT), THEN ASK HF050. |
| OTHERWISE, GO TO SECTION 17-AC. |
+---+

HF050.   In the last 12 months, did {you/you or other adults in your household} ever not eat for a whole day because there wasn't enough money for food?

DISPLAY INSTRUCTIONS:
Display "you or other adults in your household" if there is a household member, besides the respondent, who is 18 years of age or older. Else display "you".

                   YES...1
                   NO...2 (HF060)
                   REFUSED..RF (HF060)
                   DON'T KNOW...DK (HF060)

HF055.   How often did this happen? Would you say…

                   Almost every month,...1
                   Some months, but not every month, or...............................2
                   In only 1 or 2 months?...3
                   REFUSED..RF
                   DON'T KNOW...DK

HF060.   The next questions are about children living in the household who are under 18 years of age.

In the last 12 months, did you ever cut the size of {{CHILD}'s/any of the children's} meals because there wasn't enough money for food?

DISPLAY INSTRUCTIONS:
If there are other children younger than 18 in household besides {CHILD} (including TWIN), display "any of the children's". Else, display "{CHILD}'s".

                         YES...1
                         NO..2
                         REFUSED...RF
                         DON'T KNOW...DK

HF065.   In the last 12 months, did {{CHILD}/any of the children} ever skip a meal because there wasn't enough money for food?

DISPLAY INSTRUCTIONS:
If there are other children younger than 18 in household besides {CHILD} (including TWIN), display "any of the children's". Else, display "{CHILD}'s".

                         YES...1
                         NO..2 (HF075)
                         REFUSED...RF (HF075)
                         DON'T KNOW...DK (HF075)

HF070.   How often did this happen? Would you say…
                         Almost every month,...1
                         Some months, but not every month, or...............................2
                         In only 1 or 2 months?...3
                         REFUSED...RF
                         DON'T KNOW...DK

HF075.   In the last 12 months, {was {CHILD}/were the children} ever hungry but you just couldn't afford more food?

DISPLAY INSTRUCTIONS:
If there are other children younger than 18 in household besides {CHILD} (including TWIN), display "were the children". Else, display "was {CHILD}".

                         YES...1
                         NO..2
                         REFUSED...RF
                         DON'T KNOW...DK

HF080.   In the last 12 months, did {{CHILD}/any of the children} ever not eat for a whole day because there wasn't enough money for food?

DISPLAY INSTRUCTIONS:

If there are other children younger than 18 in household besides {CHILD} (including TWIN), display "any of the children". Else, display "{CHILD}".

YES...1
NO...2
REFUSED..RF
DON'T KNOW...DK

IF INTERVIEW IS CONDUCTED OVER THE PHONE, SKIP TO SECTION CM.

ELSE, GO TO ACASI ITEMS.

Section 17-AC: ACASI ITEMS

(04/14/06 – Draft 2)

AC001.   THE ACASI SECTION CAN BE ADMINISTERED IN ENGLISH OR SPANISH. IT CANNOT BE ADMINISTERED IF AN INTERPRETER IS BEING USED TO CONDUCT THE INTERVIEW IN A LANGUAGE **OTHER THAN** SPANISH. IN WHAT LANGUAGE IS THE INTERVIEW BEING CONDUCTED?

INTRPRTR

ENGLISH.........1
SPANISH.........2
SOME OTHER LANGUAGE USING AN INTERPRETER. ACASI WILL BE SKIPPED........3

INTRO.   I'd like you to use the headphones to listen to some questions and enter your answers into the computer yourself. This will allow you to answer the questions in complete privacy. I will not be able to hear the questions or see the answers you type into the computer. Let's review how to use the computer.

MOVE COMPUTER SO RESPONDENT CAN SEE THE KEYBOARD AND POINT OUT THE FOLLOWING:

NUMBER KEYS

ENTER KEY (TO ACCEPT AND STORE THE RESPONSES)

THE "UP ARROW KEY" TO RETURN TO A PREVIOUS SCREEN AND CHANGE AN ANSWER

ADJUST HEADPHONES FOR RESPONDENT AND DEMONSTRATE VOLUME CONTROL.

Here is a show card that tells you how to use certain keys on the computer.

GIVE **SHOW CARD AC-1** TO THE RESPONDENT.

IVIIIA1.   Before we begin the interview, would you like to complete a set of practice questions?

AUDIO ONLY: For yes, press 1. For no, press 2

1 = YES   (IVIIIA2)
2 = NO   (AC149a)

ASSIST THE RESPONDENT WITH THE HEADPHONE AND TURN THE LAPTOP SCREEN TO FACE THE RESPONDENT.

IVIIIA2.   The next questions are for practice. The interviewer is going to help you do this. Press the large {Enter} key on the right side of the keyboard to see the first question. The {Enter} key is the one with the bent arrow symbol on it.

IVIIIA3.   In what month were you born?

    1 = January

    2 = February

    3 = March

    4 = April

    5 = May

    6 = June

    7 = July

    8 = August

    9 = September

    10 = October

    11 = November

    12 = December

IVIIIA5.   The next set of practice questions will show you some of the different types of response choices that you will see as you answer questions on your own. It is important that you pay close attention to the response choices given for each question in choosing and entering your response.

    Press the {Enter} key to continue

IVIIIA6.   In the **past 12 months**, how often did you eat out at a restaurant?

    AUDIO ONLY: For once or twice, press 1. For between 3 and 5 times, press 2. For between 6 and 10 times, press 3. For between 11 and 20 times, press 4. For more than 20 times, press 5. For never, press 6.

    1 = Once or twice

    2 = Between 3 and 5 times

    3 = Between 6 and 10 times

    4 = Between 11 and 20 times

    5 = More than 20 times

    6 = Never

IVIIIA7.   In the **past 12 months**, how many times have you attended a concert?

AUDIO ONLY: For 1 time, press 1. For 2 times, press 2. For 3 to 5 times, press 3. For 6 to 10 times, press 4. For more 11 to 20 times, press 5. For more than 20 times, press 6. For not in the past **12 months**, but it happened before, press 7. For this has never happened, press 8.

1 = 1 time

2 = 2 times

3 = 3 to 5 times

4 = 6 to 10 times

5 = 11 to 20 times

6 = More than 20 times

7 = Not in the past **12 months**, but it happened before

8 = This has never happened

IVIIIA8.   Thank you. If you have any questions about how to use the computer, please ask your interviewer now. Otherwise, press the {Enter} key to continue.

AC149a-l
BOTHERED, POORAPP, NOSHKBLU, MINDONTSK,
DEPRESSED, ALLEFFORT, FEARFUL, RESTLESS,
TLKLESS, LONELY, SAD, GETGOING

Here is a list of ways you may have felt or behaved recently. How often during the past week have you felt these ways? Would you say <u>rarely or never (less than one day)</u>, <u>some or a little of the time (1 to 2 days), occasionally or a moderate amount of the time (3 to 4 days)</u>, <u>or most or all of the time (5 to 7 days)</u>? How often during the past week have you felt…

a.   You were bothered by things that usually don't bother you?
b.   You did not feel like eating; your appetite was poor?
c.   You could not shake off the blues, even with help from your family and friends?
d.   You had trouble keeping your mind on what you were doing?
e.   You were depressed?...................................
f.   Everything you did was an effort?.................
g.   You were fearful?...
h.   Your sleep was restless?..............................
i.   You talked less than usual?...........................
j.   You were lonely?..
k.   You were sad?..
l.   You could not get "going"?............................

AUDIO ONLY: For rarely or never (less than one day), press 1. For some or a little (1-2 days), press 2. For occasionally or moderate (3-4 days), press 3. For most or all days (5-7 days), press 4.

RARELY OR NEVER (LESS THAN ONE DAY)   1
SOME OR A LITTLE (1-2 DAYS)   2
OCCASIONALLY OR MODERATE (3-4 DAYS)   3
MOST OR ALL DAYS (5-7 DAYS)   4

ACDone. Thank you, you have now completed this section of the interview. Please let your interviewer know you are finished.

GO TO SECTION 18-CM

Section 18-CM: CLOSING MATERIAL

CMINTRO

Thank you for taking the time to participate in the parent interview portion of this important study. As I promised you earlier, this interview is completely confidential and we won't share any information with anyone else.

ENTER "1" TO BEGIN CLOSING MATERIALS SECTION.

CM160aBX
IF RESPONDENT IS NOT CHILD'S LEGAL GUARDIAN AND CHILD IS ENROLLED (SE010 = 1 AND SE015 NE 1 AND SE030 NE 1 AND SE032 NE 1), GO TO CM160a.

ELSE, GO TO CM160BX.

CM160a

THE NEXT FEW QUESTIONS ARE ABOUT {CHILD'S} TEACHER CONTACT INFORMATION.
YOU <u>MUST HAVE</u> THE LEGAL GUARDIAN'S SIGNATURE ON THE **LEGAL GUARDIAN PERMISSION TO CONTACT CHILD'S TEACHER IN THE ECLS-B KINDERGARTEN 2007 ROUND** FORM BEFORE WE CAN CONTACT THE TEACHER.

DO YOU HAVE A SIGNED TEACHER LEGAL GUARDIAN PERMISSION FORM AND LETTER?

                1 YES (GO TO CM160BX)
                2 NO

CM160B

WILL YOU BE OBTAINING THE LEGAL GUARDIAN'S SIGNATURE ON THE **LEGAL GUARDIAN PERMISSION TO CONTACT CHILD'S TEACHER IN THE ECLS-B KINDERGARTEN 2007 ROUND** FORM?

                1 YES
                2 NO

If CM160b=2, display:

"WITHOUT SIGNED CONSENT, THE INTERVIEW WILL NOT COLLECT THE CONTACT INFORMATION FOR THE TEACHER.

PLEASE VERIFY YOUR RESPONSE. PRESS 'S' IF YOUR RESPONSE IS CORRECT."

```
┌─────────────────────────────────────────────────────────────────────────────┐
│                                  CM160BX                                      │
│                                                                               │
│   IF CHILD IS ENROLLED (SE010 = 1 AND SE015 NE 1 AND SE030 NE 1 AND SE032 NE 1), GO TO │
│                                  CM160PRE.                                     │
│                                                                               │
│                IF CHILD IS NOT ENROLLED IN SCHOOL (SE010 NE 1)                 │
│   OR CHILD IS HOMESCHOOLED (SE015 = 1) OR CHILD IS IN PRESCHOOL (SE030 = 1 OR SE032 = 1), │
│                                GO TO CM051BX.                                  │
│                                                                               │
│        ELSE IF TWIN IS ENROLLED (SE010=1 AND SE015 NE 1 AND SE030 NE 1) AND CM160PRE │
│                WAS NOT ASKED (EMPTY) FOR CHILD, GO TO CM160PRE FOR TWIN.       │
│                                                                               │
│                            ELSE GO TO CM051BX.                                 │
│                                                                               │
└─────────────────────────────────────────────────────────────────────────────┘
```

CM160PRE (CM160T)
> {FOR CHILD: As/FOR TWIN: As I said before, As} part of this study, we will be interviewing the teachers of children in the study.
>
> {If IN000LG=2 (NOT LEGAL GUARDIAN) AND CM160a=1 (FI HAS SIGNED TEACHER LEGAL GUARDIAN PERMISSION FORM), DISPLAY: We have permission from the legal guardian to contact {CHILD/TWIN}'s teacher
>
> {If IN000LG=2 (NOT LEGAL GUARDIAN) AND CM160a=2 (FI DOES NOT HAVE SIGNED TEACHER LEGAL GUARDIAN PERMISSION FORM), DISPLAY: Before we contact {CHILD/TWIN}'s teacher, we will obtain permission from {CHILD/TWIN'S} legal guardian.
>
>
> TAKE OUT THE {PERMISSION FORM} AND NOTIFICATION LETTER.
>
> DISPLAY INSTRUCTIONS: Display "**LEGAL GUARDIAN PERMISSION TO CONTACT CHILD'S TEACHER**" if IN000LG = 2. Else display "**PERMISSION TO CONTACT CHILD'S TEACHER IN THE ECLS-B KINDERGARTEN 2007 ROUND**."
>
> We would like your permission to contact {CHILD/TWIN}'s teacher. We have a permission form and a letter that we would like you to sign.
>
>
> PRESS "1" AND THEN ENTER TO CONTINUE.

CM165BX

IF IN000LG = 2, GO TO CM177BX.

ELSE GO TO CM165.

IF TWCCARE NE YES,

CM165
REVPERM
DISPLAY INSTRUCTIONS:

USE THIS FORM: **PERMISSION TO CONTACT CHILD'S TEACHER IN THE ECLS-B KINDERGARTEN 2007 ROUND**.

1. REVIEW PERMISSION FORM WITH RESPONDENT.

2. FILL OUT THE PERMISSION FORM (THE COPY YOU JUST REVIEWED WITH RESPONDENT).

3. HAND RESPONDENT PERMISSION FORM TO READ AND SIGN.

4. AFTER FORM IS SIGNED, HAND PINK COPY TO RESPONDENT.

5. PLACE REMAINING COPIES IN CASE FOLDER.

6. ASK RESPONDENT TO SIGN NOTIFICATION LETTER.

7. PLACE SIGNED NOTIFICATION LETTER IN CASE FOLDER.

Will you give your written permission for RTI to contact {CHILD/TWIN}'s teacher?

IF NECESSARY TO ANSWER PARENT QUESTIONS, REFER TO TEACHER FAQ LOCATED IN THE BACK OF THE FI MANUAL.

DID THE RESPONDENT SIGN THE PERMISSION FORM?

YES:[SET TPermt to YES]..1
NO...2 (CM220BX)

REVp_FUBX

IF CM165 [REVPERM]=1 AND INOOIP [INPERSON]=2, GO TO REVP_FU

REVp_FU

In a few days, RTI will mail you a few forms that I will need you to sign. Your signature on these forms will be the written permission that RTI will need to contact {CHILD/TWIN}'s teacher. Once signed, we will ask that you mail the forms back to us in a postage paid envelope.

CM177BX
IF ASKING ABOUT CHILD, GO TO SC035

IF ASKING ABOUT TWIN AND SE005 NE 1, GO TO SC035].

IF ASKING ABOUT TWIN AND SE005 = 1 (SAME SCHOOL AS CHILD) AND SE098 [SAMETCHR] = 1 (SAME TEACHER AS CHILD), GO TO CM051BX.

IF ASKING ABOUT TWIN AND SE005 = 1 (SAME SCHOOL AS CHILD) AND SE098 NE 1 (NOT SAME TEACHER AS CHILD), GO TO CM195 [TCHFNAM].

SC035.

Now I'd like to find out the name and address of {CHILD/TWIN}'s school. In what state is the school located?

ENTER STATE ABBREVIATION.

IF YOU ARE UNCERTAIN OF THE STATE ABBREVIATION, PRESS THE F1 KEY TO SEE A LIST OF ABBREVIATIONS.

SC040.
L_SCHOOLID

What is the name of the school?

TO LOOKUP THE SCHOOL ID, ENTER AT LEAST FIRST THREE LETTERS OF SCHOOL NAME. USUALLY, THE MORE LETTERS YOU ENTER THE MORE LIKELY YOU WILL FIND THE RIGHT SCHOOL. BUT THIS IS NOT ALWAYS THE CASE.

ONCE YOU HAVE FOUND THE CORRECT SCHOOL
-    HIGHLIGHT THE SCHOOL DESIRED BY USING THE UP AND DOWN ARROWS
-    PRESS [ENTER] TO SELECT THE SCHOOL
-    PRESS [ENTER] AGAIN TO SELECT THE ID

IF YOU CANNOT FIND THE SCHOOL, TRY ENTERING DIFFERENT LETTERS IN THE SCHOOL NAME.

IF YOU STILL CANNOT FIND THE SCHOOL, TYPE 'NOTFOUND' AND PRESS [ENTER] TO SELECT. IF THE SCHOOL NAME CONTAINS A NUMBER, LIKE PUBLIC SCHOOL 14, TRY SEARCHING FOR THE NUMBER 14.

SC044. What is the name of the school where {CHILD/TWIN} attends school?
ENTER NAME OF SCHOOL

VERIFY SPELLING

SC045a. What is the address of {SCHOOL NAME}?

ENTER MAILING ADDRESS – LINE 1

VERIFY SPELLING

DON'T KNOW………………………………………………DK
REFUSED…………………………………………………..RF

SC045b. [What is the address of the school?]

ENTER MAILING ADDRESS – LINE 2

VERIFY SPELLING

DON'T KNOW………………………………………………DK
REFUSED…………………………………………………..RF

SC046. [What is the address of the school?]

ENTER CITY

VERIFY SPELLING

DON'T KNOW………………………………………………DK
REFUSED…………………………………………………..RF

SC047. [What is the address of the school?]

ENTER ZIP

VERIFY SPELLING

DON'T KNOW………………………………………………DK
REFUSED…………………………………………………..RF

SC048. What is the phone number of the school?

ENTER PHONE NUMBER

DON'T KNOW………………………………………………DK
REFUSED…………………………………………………..RF

SKIP TO SC050a

SC049.

Let me confirm the school information I have. Is this information correct?

[INSERT SCHOOL NAME, ADDRESS, AND PHONE NUMBER]

CONFIRM SCHOOL NAME AND MAILING ADDRESS INFORMATION.

YES, SCHOOL NAME, ADDRESS AND
PHONE NUMBER ARE CORRECT……………………………1 (CM195)

NO, WRONG SCHOOL -- RESELECT…………………………2 (Back to L_SCHOOLID)

NO, SCHOOL NAME IS CORRECT,
BUT ADDRESS IS INCORRECT………………………………3 (CONTINUE TO SC050b)

NO, SCHOOL NAME AND ADDRESS ARE
CORRECT, BUT PHONE NUMBER IS
INCORRECT……………………………………………………..4 (SC050F)

DON'T KNOW…………………………………………………….DK
REFUSED…………………………………………………………RF

SC050b.

What is the mailing address for {SCHOOL NAME}?

DATABASE HAS: [INSERT ADDRESS]

MAKE CORRECTIONS TO THE MAILING ADDRESS – LINE 1 BELOW OR PRESS ENTER
TO ACCEPT [INSERT ADDRESS]

VERIFY SPELLING

SC050c.

[What is the mailing address for the school?]

MAKE CORRECTIONS TO THE MAILING ADDRESS – LINE 2 BELOW OR PRESS ENTER
TO ACCEPT

VERIFY SPELLING

PRESS ENTER IF INFORMATION IS CORRECT

SC050d.

[In what city is the school?]

DATABASE HAS: [INSERT CITY]

MAKE CORRECTIONS TO THE CITY BELOW OR PRESS ENTER TO ACCEPT [INSERT
CITY]

SC050e.

[What is the zip code for the school?]

DATABASE HAS: [INSERT ZIP CODE]

MAKE CORRECTIONS TO THE ZIP CODE BELOW OR PRESS ENTER TO ACCEPT [INSERT ZIP CODE]

SC050f.

What is the phone number for the school?

DATABASE HAS: [INSERT PHONE NUMBER]

MAKE CORRECTIONS TO THE PHONE NUMBER BELOW OR PRESS ENTER TO ACCEPT [INSERT PHONE NUMBER]

→ ALL SKIP TO SC051

SC050a.

Let me confirm the school information I have. Is this information correct?

INSERT SCHOOL NAME AND ADDRESS INFORMATION

YES…………………………………………………………….1 (CM195)
NO………………………………………………………………2 (PLEASE PRESS ENTER TO
                                                 GO BACK TO SCHOOL
                                                 ADDRESS SCREEN SC044)

SC051.

Let me confirm address and phone number for {SCHOOL NAME}. Is this information correct?

YES…………………………………………………………….1 (CM195)
NO………………………………………………………………2 (PLEASE PRESS ENTER TO
                                                 GO BACK TO SCHOOL
                                                 ADDRESS SCREEN SC050b)

CM195.   What is the name of {CHILD/TWIN}'s teacher?
TCHFNAM

Display:

INTERVIEWER: EMPHASIZE THE IMPORTANCE OF OBTAINING THE CORRECT SPELLING OF THE TEACHER'S NAME SO A QUESTIONNAIRE CAN BE MAILED TO HIM/HER. IF THE PARENT IS UNSURE OF THE SPELLING, ENCOURAGE HIM/HER TO REFER TO A LETTER FROM THE SCHOOL WHERE THE TEACHER'S NAME IS LISTED.

ENTER FIRST NAME

VERIFY SPELLING

DON'T KNOW………………………………………………………….DK
REFUSED………………………………………………..RF

CM196.   [What is the name of {CHILD/TWIN}'s teacher?]

TCHLNAM

ENTER LAST NAME

VERIFY SPELLING

DON'T KNOW………………………………………………………….DK
REFUSED………………………………………………..RF

CM200.   What is the teacher's gender?
TCHGEN

MALE………………………………………………………………1
FEMALE…………………………………………………..2
DON'T KNOW…………………………………………..DK
REFUSED………………………………………………..RF

CM205.   What is {CHILD/TWIN}'s classroom number?
CLASNUM

ENTER CLASSROOM NUMBER

VERIFY NUMBER

DON'T KNOW……………………………………………………….DK
REFUSED……………………………………………………….RF

+---+
| **CM210BX** |
| IF ASKING ABOUT TWIN AND SE005 = 1 (SAME SCHOOL AS CHILD), |
| GO TO CM051BX. |
| ELSE IF TWIN SE005 NE 1, GO TO CM210 [ADFNAM]. |
+---+

CM210.   What is the name of the school's administrator?
ADFNAM

ENTER FIRST NAME

VERIFY SPELLING

DON'T KNOW………………………………………………………….DK
REFUSED………………………………………………..RF

CM215.   [What is the name of the school's administrator?]
ADLNAM

              ENTER LAST NAME

              VERIFY SPELLING

              DON'T KNOW……………………………………………………….DK
              REFUSED…………………………………………………..RF

CM220.   What is the administrator's gender?
ADGEN

              MALE……………………………………………………….1
              FEMALE…………………………………………………..2
              DON'T KNOW…………………………………………..DK
              REFUSED…………………………………………………..RF


```
                              CM220BX
         IF ASKING ABOUT TWIN, THEN GO BACK TO CM160PRE.
                     ELSE, GO TO CM051BX.
```


```
                              CM060Abx

   IF RESPONDENT IS NOT CHILD'S LEGAL GUARDIAN AND [SE010=1
  (CHILD IN SCHOOL) OR SE015=1 (CHILD IS HOMESCHOOLED)] AND
    [SE030=2 OR SE032=2 (CHILD IN KINDERGARTEN)] AND CHILD IS
       FLAGGED AS HAVING A CHILD CARE PROVIDER (CHCCARE=1)
  AND [CARE PROVIDED IS >= 5 HOURS PER WEEK], GO TO CM060a.

    ELSE IF RESPONDENT IS NOT CHILD'S LEGAL GUARDIAN AND
        ASKING ABOUT TWIN AND [SE010=1 (TWIN IN SCHOOL) OR
    SE015=1 (TWIN IS HOMESCHOOLED)] AND [SE030=2 OR SE032=2
     (TWIN IN KINDERGARTEN)] AND TWIN IS FLAGGED AS HAVING A
    CHILD care provider (CHCCARE=1) AND [CARE PROVIDED IS >= 5
                   HOURS PER WEEK], GO TO CM060a.

                     ELSE, GO TO CM051BX.
```

CM060a

THE NEXT FEW QUESTIONS ARE ABOUT {CHILD'S} CAREGIVER CONTACT INFORMATION.
YOU MUST HAVE THE LEGAL GUARDIAN'S SIGNATURE ON THE **LEGAL GUARDIAN PERMISSION TO CONTACT THE WRAP-AROUND EARLY CARE AND EDUCATION PROVIDER (WECEP) TO PARTICIPATE IN THE ECLS-B KINDERGARTEN 2007 ROUND** AND THE **LEGAL GUARDIAN WECEP NOTIFICATION LETTER** BEFORE WORKING THE WECEP INTERVIEW.

DO YOU HAVE A SIGNED WECEP LEGAL GUARDIAN PERMISSION FORM AND LETTER?

```
1……………………YES (GO TO CM051BX)
2……………………NO
```

CM060b

WITHOUT SIGNED CONSENT, THE INTERVIEW WILL NOT COLLECT THE CONTACT
INFORMATION FOR THE WECEP AND WILL NOT SPAWN THE CASE.

WILL YOU BE OBTAINING THE LEGAL GUARDIAN'S SIGNATURE ON THE **LEGAL GUARDIAN
PERMISSION TO CONTACT THE WRAP-AROUND EARLY CARE AND EDUCATION PROVIDER
(WECEP) IN THE ECLS-B KINDERGARTEN ROUND** AND THE **LEGAL GUARDIAN WECEP
NOTIFICATION LETTER**?

```
1…………………………YES
2…………………………NO
```

CM051BX

IF ASKING ABOUT CHILD AND [SE010=1 (CHILD IN SCHOOL) OR SE015=1 (CHILD
    IS HOMESCHOOLED)] AND [SE030=2 OR SE032=2 (CHILD IN KINDERGARTEN)]
    AND CHILD IS FLAGGED AS HAVING A CHILD CARE PROVIDER (CHCCARE=1)
    AND [CARE PROVIDED IS >= 5 HOURS], GO TO CM060PRE.

ELSE IF ASKING ABOUT TWIN [SE010=1 (TWIN IN SCHOOL) OR SE015=1 (TWIN IS
    HOMESCHOOLED)] AND [SE030=2 OR SE032=2 (TWIN IN KINDERGARTEN)]
    AND TWIN IS FLAGGED AS HAVING A CHILD CARE PROVIDER (CHCCARE=1)
    AND [CARE PROVIDED IS >= 5 HOURS], GO TO CM060PRE.

IF RESPONDENT IS NOT CHILD'S LEGAL GUARDIAN, SKIP TO CM060PREC.

ELSE, GO TO SECTION LF.

CM060PRE

DISPLAY INSTRUCTIONS:
If child care provider where most hours of care is home care and relative care hours is greater
than or equal non-relative care hours, then display "relative caregiver".

If child care provider where most hours of care is home care and relative care hours is less than
non-relative care, then display "non-relative caregiver".

If child care provider where most hours of care are center-based care, then display "before- and
after-school center director and teacher".

If child care provider where most hours of care is public school care then display "before- and
after-school director and teacher".

If respondent is child's legal guardian:

{FOR CHILD: As/FOR TWIN: As I said before, As} part of this study, we will be interviewing the early care and education provider of children in the study. We would like to talk to {CHILD/TWIN}'s {see display note}.

TAKE OUT THE **PARENTAL PERMISSION TO CONTACT THE WRAP-AROUND EARLY CARE AND EDUCATION PROVIDER (WECEP) TO PARTICIPATE IN THE ECLS-B KINDERGARETN 2007 ROUND** FORM, NOTIFICATION LETTER AND FACT SHEET.

We would like your permission to contact {CHILD/TWIN}'s { see display note} We have a permission form and a letter that we would like you to sign, and we also have a fact sheet that tells you a little more about the child care part of the study.

HAND RESPONDENT A COPY OF THE FACT SHEET.

PRESS "1" AND THEN ENTER TO CONTINUE.

If respondent in not child's legal guardian:

CM060PREc

As part of this study, we will be interviewing the early care and education provider of children in the study. We would like to talk to {CHILD/TWIN}'S before- and after-school school director and teacher. (We have permission from the legal guardian to contact {CHILD/TWIN}'s {see display note}. Before we contact {CHILD/TWIN}'s {see display note}, we will obtain permission from {CHILD/TWIN}'s legal guardian.)

We have a fact sheet that tells you a little more about the child care part of the study.

HAND RESPONDENT A COPY OF THE FACT SHEET.

CM065.

USE THIS FORM: PARENTAL PERMISSION TO CONTACT THE WRAP-AROUND EARLY CARE AND EDUCATION PROVIDER (WECEP) TO PARTICIPATE IN THE ECLS-B KINDERGARTEN 2007 ROUND.

1. **REVIEW PERMISSION FORM WITH RESPONDENT.**
2. **FILL OUT THE PERMISSION FORM (THE COPY YOU JUST REVIEWED WITH RESPONDENT).**
3. **HAND RESPONDENT PERMISSION FORM TO READ AND SIGN.**
4. **AFTER FORM IS SIGNED, HAND PINK COPY TO RESPONDENT.**
5. **PLACE REMAINING COPIES IN CASE FOLDER.**
6. **ASK RESPONDENT TO SIGN NOTIFICATION LETTER.**
7. **PLACE SIGNED NOTIFICATION LETTER IN CASE FOLDER.**

Will you give your written permission for me to contact {CHILD/TWIN}'s caregiver?

YES...1
NO...2 (SECTION LF)?

IF NECESSARY TO ANSWER PARENT QUESTIONS, REFER TO CHILD CARE FAQ LOCATED IN THE BACK OF THE FI MANUAL

IF CM065 [CPPERMT]=1 AND INOOIP [INPERSON]=2, GO TO CPP_FU

CPP_FU

In a few days, RTI will mail you a few forms that I will need you to sign. Your signature on these forms will be the written permission that RTI will need to contact {CHILD/TWIN}'s provider. Once signed, we will ask that you mail the forms back to us in a postage paid envelope.

CM075BX

IF ASKING ABOUT CHILD, GO TO CM079.

ELSE IF ASKING ABOUT TWIN AND CC005 =YES AND PROVIDER WHERE MOST HOURS OF CARE PROVIDED IS CENTER-BASED, THEN GO TO CM095.

ELSE IF ASKING ABOUT TWIN AND CC005 =YES AND PROVIDER WHERE MOST HOURS OF CARE PROVIDED IS HOME-BASED, THEN GO TO SECTION LF.

CM079

DISPLAY INSTRUCTIONS:
If child care provider where most hours of care is home care and relative care hours is greater than or equal non-relative care hours, then display "relative caregiver".

If child care provider where most hours of care is home care and relative care hours is less than non-relative care, then display "non-relative caregiver".

If child care provider where most hours of care are center-based care, then display "center director and teacher".

If child care provider where most hours of care is public school care then display "school director and teacher".

Please feel free to mention to {CHILD/TWIN}'s {see display note} that I will be contacting them soon.

DISPLAY INSTRUCTIONS:
If child care provider where most hours of care is home care and relative care hours is greater than or equal non-relative care hours, then display "relative caregiver".

If child care provider where most hours of care is home care and relative care hours is less than non-relative care, then display "non-relative caregiver".

If child care provider where most hours of care are center-based care, then display "center director and teacher".

If child care provider where most hours of care is public school care then display "school director and teacher".

Please tell me anything special that I should know about contacting your {see display note}.

PROBE: For example, the best time to call your child care provider about the interview.

CM080

DISPLAY INSTRUCTIONS:
If child care provider where most hours of care is home care and relative care hours is greater than or equal non-relative care hours, then display "relative caregiver".

If child care provider where most hours of care is home care and relative care hours is less than non-relative care, then display "non-relative caregiver".

If child care provider where most hours of care are center-based care, then display "center director".

If child care provider where most hours of care is public school care then display "school director".

What is the name of {CHILD/TWIN}'s {see display note}?

VERIFY SPELLING

ENTER FIRST NAME.

REFUSED...RF
DON'T KNOW..DK

CM085

DISPLAY INSTRUCTIONS:
Use the instruction from CM080.

[What is the name of {CHILD/TWIN}'s {see display note}?]

VERIFY SPELLING.

ENTER LAST NAME.

REFUSED...RF
DON'T KNOW..DK

IF TMOSTCARE=HOMECARE, GO TO CM108BX.

CM086

What is {PROVNAME}'s primary language?
DISPLAY INSTRUCTIONS:
Display name entered at CM080/CM085 for {PROVNAME}.

ENGLISH...................................…………………………1
ARABIC...2
CHINESE...3
FILIPINO LANGUAGE – (E.G., TAGALOG, ILOCANO, ETC.) .4
FRENCH..5
GERMAN...6
GREEK..7
ITALIAN...……8
JAPANESE...9
KOREAN..10
POLISH..11
PORTUGUESE..12
SPANISH...13
VIETNAMESE...14
AFRICAN...15
EAST EUROPEAN………..................................……….16
NATIVE AMERICAN..17
SIGN LANGUAGE..18
MIDDLE EASTERN...19
WEST EUROPEAN...20
INDIAN SUBCONTINENT..21
SOUTHEAST ASIAN...22
PACIFIC ISLAND...23
CANNOT CHOOSE...24
ENTER SOME OTHER LANGUAGE................................91
(Specify) *[What primary language does the provider*
*speak?]*_____
REFUSED..RF
DON'T KNOW..DK

CM087

ASK IF NECESSARY. Is {PROVNAME} male or female?
DISPLAY INSTRUCTIONS:
Display name entered at CM080/CM085 for {PROVNAME}.

MALE...1
FEMALE..2
REFUSED..3
DON'T KNOW...4

CM090aBX

IF SC040 IS MISSING, SKIP CM090A.

CM090a

Is this before- and after-school care provided at [FILL WITH SCHOOL NAME FROM CM180/SCHOOL LOOK-UP]?

YES...1 (CM093)
NO...2
REFUSED..RF
DON'T KNOW...DK

CM090

What is the name of {CHILD/TWIN}'s child care center?

REFUSED...RF
DON'T KNOW...DK

CM093

DISPLAY INSTRUCTIONS:
Use the instruction from CM080 where it says {display note}. If child care provider where most hours of care are home care or center-based care, then display "caregiver".

If child care provider where most hours of care is public school care then display "teacher".

Is {CHILD/TWIN}'s {see display note} the same person as {his/her} primary {caregiver/teacher}?

YES...1   (CM115BX)
NO...2
REFUSED..RF
DON'T KNOW...DK

IF SE005=1, ASK CM095. ELSE, GO TO CM100.

CM095

DISPLAY INSTRUCTIONS:
Display name entered for CHILD at CM100/CM105 for {PROVNAME}. SHOULD THIS BE CM80/MC85?

Does {TWIN} also have {PROVNAME} as {his/her} primary {caregiver/teacher} at {CENTER NAME}?

YES ....(SECTION LF)
NO...2
REFUSED3 ....(SECTION LF)
DON'T KNOW..4   (SECTION LF)

CM100

DISPLAY INSTRUCTIONS:
If asking about CHILD, or if asking about TWIN and CC005 ^= YES, display response to CM090 for "{CENTER NAME}".

Else if asking about TWIN and CC005 =YES, then display CHILD's response for CM090 for "{CENTER NAME}".

What is the name of {CHILD/TWIN}'s primary {caregiver/teacher} at {CENTER NAME}?
VERIFY SPELLING.
ENTER FIRST NAME.

REFUSED...RF
DON'T KNOW...DK

CM105

DISPLAY INSTRUCTIONS:
Display response to CM090 for "{CENTER NAME}".

[What is the name of {CHILD/TWIN}'s primary {caregiver/teacher} at {CENTER NAME}?]
VERIFY SPELLING.
ENTER LAST NAME.

REFUSED...RF
DON'T KNOW...DK

CM108BX

IF (ASKING ABOUT CHILD, OR (ASKING ABOUT TWIN AND CC005 ^= YES)) AND CM093 NE YES, THEN GO TO CM108.

ELSE, GO TO CM115BX.

CM108

What is {PROVNAME}'s primary language?
DISPLAY INSTRUCTIONS:
If TMOSTCARE=CENTERBASED, display name entered at CM100/CM105 for {PROVNAME}.

If TMOSTCARE=HOMECARE, display name entered at CM080/CM085 for {PROVNAME}.

ENGLISH...............................……………………….1
ARABIC..2
CHINESE...3
FILIPINO LANGUAGE (E.G. TAGALOG, ILOCANO, ETC) .4
FRENCH..5
GERMAN...6
GREEK..7
ITALIAN...……..8
JAPANESE..9
KOREAN..10
POLISH..11
PORTUGUESE..12
SPANISH...13
VIETNAMESE..14
AFRICAN...15
EAST EUROPEAN…….....................................…..16
NATIVE AMERICAN..17
SIGN LANGUAGE...18
MIDDLE EASTERN..19
WEST EUROPEAN..20
INDIAN SUBCONTINENT....................................21
SOUTHEAST ASIAN...22
PACIFIC ISLAND...23
CANNOT CHOOSE...24
ENTER SOME OTHER LANGUAGE...............................91
(Specify) *[What primary language does the provider speak?]*_____
REFUSED..RF
DON'T KNOW..DK

CM110

ASK IF NECESSARY. Is {PROVNAME} male or female?
DISPLAY INSTRUCTIONS:
If TMOSTCARE=CENTERBASED, display name entered at CM100/CM105 for {PROVNAME}.

If TMOSTCARE=HOMECARE, display name entered at CM080/CM085 for {PROVNAME}.

MALE...1
FEMALE..2
REFUSED..RF
DON'T KNOW..DK

CM113

Is {PROVNAME} 18 years of age or older?
DISPLAY INSTRUCTIONS:
If TMOSTCARE=CENTERBASED, display name entered at CM100/CM105 for {PROVNAME}.

If TMOSTCARE=HOMECARE, display name entered at CM080/CM085 for {PROVNAME}.

<div align="center">

YES...1
NO..2
REFUSED...3
DON'T KNOW...4

</div>

CM114BX

IF CM113 NE 1 (CAREGIVER IS A MINOR) AND INTERVIEW IS BEING
CONDUCTED IN WASHINGTON STATE,

DO NOT CONDUCT WECEP INTERVIEW.

CM115BX
IF (ASKING ABOUT CHILD, OR (ASKING ABOUT TWIN AND CC005
^= YES) AND CM090a^=YES, THEN GO TO CM115.
ELSE, GO TO SECTION LF.

CM115.   DISPLAY INSTRUCTIONS:
If, based on TMOSTCARE, child care provider
where most hours of care is relative or non-relative caregiver, display name entered at
CM080/CM085 for "{RELATIVE/{CAREGIVER/TEACHER}'S NAME}".

If child care provider where most hours of care is center-based care, display name
entered at CM090 for "{CENTER NAME}".

What is the mailing address of {{RELATIVE/CAREGIVER'S NAME)/(CENTER NAME}}?

ENTER FIRST LINE OF MAILING ADDRESS.

VERIFY SPELLING.

CM120.   DISPLAY INSTRUCTIONS:
              If, based on TMOSTCARE, child care provider where most hours of care is relative or
              non-relative caregiver, display name entered at CM080/CM085 for
              "{RELATIVE/CAREGIVER'S NAME}".

              If child care provider where most hours of care is center-based care, display name
              entered at CM090 for "{CENTER NAME}".

              [What is the mailing address of {{RELATIVE/CAREGIVER'S NAME}/{CENTER NAME}}?]

              ENTER SECOND LINE OF THE MAILING ADDRESS. IF THERE IS NO SECOND LINE,
              PRESS ENTER. DO NOT ENTER INFORMATION SUCH AS 'NONE' OR 'NA.'

              VERIFY SPELLING.

              {STREET ADDRESS1}

CM125.   DISPLAY INSTRUCTIONS:
              If, based on TMOSTCARE, child care provider where most hours of care is relative or
              non-relative caregiver, display name entered at CM080/CM085 for
              "{RELATIVE/CAREGIVER'S NAME}".

              If child care provider where most hours of care is center-based care, display name
              entered at CM090 for "{CENTER NAME}".

              [What is the mailing address of {{RELATIVE/CAREGIVER'S NAME}/{CENTER NAME}}?]

              ENTER CITY.

              VERIFY SPELLING.

              {STREET ADDRESS1}

              {STREET ADDRESS2}

CM130.   **HELP AVAILABLE**
              DISPLAY INSTRUCTIONS:
              If, based on TMOSTCARE, child care provider where most hours of care is relative or
              non-relative caregiver, display name entered at CM080/CM085 for
              "{RELATIVE/CAREGIVER'S NAME}".

              If child care provider where most hours of care is center-based care, display name
              entered at CM090 for "{CENTER NAME}".

              DATA CHECK: If state entered does not match state entered in (IN000ST) please
              display 'The state entered differs from the state in which the interview is being conducted,
              please modify the provider state if necessary and press enter to continue.'

              [What is the mailing address of {{RELATIVE/CAREGIVER'S NAME}/{CENTER NAME}}?]

              ENTER STATE.

              USE [F1] TO CHECK STATE CODES, IF YOU ARE UNCERTAIN.

{STREET ADDRESS1}

{STREET ADDRESS2}

{CITY}

CM135.   DISPLAY INSTRUCTIONS:
If, based on TMOSTCARE, child care provider where most hours of care is relative or non-relative caregiver, display name entered at CM080/CM085 for "{RELATIVE/CAREGIVER'S NAME}".

If child care provider where most hours of care is center-based care, display name entered at CM090 for "{CENTER NAME}".

[What is the mailing address of {{RELATIVE/CAREGIVER'S NAME}/{CENTER NAME}}?]

ENTER ZIP CODE.

VERIFY ZIP CODE.

{STREET ADDRESS1}

{STREET ADDRESS2}

{CITY} {STATE}

CM140.   DISPLAY INSTRUCTIONS:
If, based on TMOSTCARE, child care provider where most hours of care is relative or non-relative caregiver, display name entered at CM080/CM085 for "{RELATIVE/CAREGIVER'S NAME}".

If child care provider where most hours of care is center-based care, display name entered at CM090 for "{CENTER NAME}".

What is {{RELATIVE/CAREGIVER'S NAME}/{CENTER NAME}}'s telephone number?

IF NO TELEPHONE, ENTER 000.

GO TO SECTION LF

Section 19-LF: LOCATOR ITEMS

LF100PRE   Now I'd like to confirm your full name and contact information.

        Please remember that everything you tell me is voluntary, and will be kept confidential in the ways that were explained to you at the beginning of the interview."

{SKIP TO LF110 [LFMAIDNM] IF NAME WAS COLLECTED IN IN007 [RROSTNUM] OR IN025 [RESPFNAM]}

LF105 [**FNAME**] I'd like to verify your full legal name. Is your full legal name...

{bold}READ DISPLAYED NAME. CORRECT AS NEEDED.{normal}"

{DISPLAY DATA FROM PREVIOUS INTERVIEW FOR VERIFICATION}

("FIRST NAME: {fill FIRST NAME from K'06 IN025 [RESPFNAM]}STRING [20]"
"MIDDLE NAME: {fill MIDDLE NAME from K'06 IN026 [RESPMNM]; if no middle name or initial, fill with "NMN"} STRING [20]"
"LAST NAME: {fill LAST NAME from K'06 IN027 [RESPLNAM]}STRING [30]")

      "IF RESPONDENT DOES NOT HAVE A MIDDLE NAME OR INITIAL, Then "NMN" SHOULD BE IN THE BLANK FOR MIDDLE NAME."

<div style="border:1px solid black;padding:8px;">

IF RESPONDENT NOT THE SAME AS RESPONDENT IN K'06 AND RESPONDENT IS FEMALE, ASK LF110.

ELSE, GO TO LF115.

</div>

LF110 [**LFMAIDNM**]   What is your maiden name?

("MAIDEN NAME: STRING [30]")

PRESS ENTER IF RESPONDENT DOESN'T HAVE A MAIDEN NAME.

LF115 [**LFHAVNM**]   Do you go by any other names or nicknames?

        YES...1
        NO...2 (LF125
        REFUSED...RF (LF125)

LF120 [**ALIAS1**]   What are they?

("ALIAS #1:" STRING [40]
"ALIAS #2:" STRING [40])

      "PRESS 1 TO CONTINUE."

LF125 [LFCFADDR]   Let me confirm your address.
VERIFY INFORMATION DISPLAYED ON SCREEN. CORRECT AS NEEDED.

("STREET ADDRESS:" STRING [50]
"CITY": STRING [50]
"STATE:" STRING [2]
"ZIP:" STRING [9])

LF126 [LFATYP]   Is this your mailing address?

               YES..1
               NO..2
               REFUSE..RF (LF150a)
               DON'T KNOW...DK (LF150A)

LF126a [LFSTREET]   Is this your street address?

               YES..1
               NO..2
               REFUSED………………………………………………RF (LF150a)
               DON'T KNOW……………………………………………….DK (LF150a)

{IF LF126 [LFATYP] = 1 AND LF126a [LFSTREET]=1 (MAILING ADDRESS IS STREET ADDRESS), GO TO LF150a [STRADDR];

IF LF126 [LFATYP] = 1 AND lf126A [LFSTREET]=2 (MAILING ADDRESS IS NOT STREET ADDRESS), ASK LF127 .}

IF LF126 [LFATYP] = 2 AND LF126a [LFSTREET = 1 (NOT MAILING ADDRESS BUT STREET ADDRESS), ASK LF128 [LFMAIL]

IF LF126 [LFATYP] = 2 AND LF126a [LFSTREET] = 2 (NOT MAILING ADDRESS AND NOT STREET ADDRESS), ASK LF127 [LFSTREET] AND LF128 [LFMAIL].

LF127 [LFSTRADDR] Let me get your street address.

VERIFY SPELLING FOR EACH ITEM.

("STREET ADDRESS:" STRING [50]
"CITY": STRING [50]
"STATE:" STRING [2]
"ZIP:" STRING [9])

LF128 [LFMAIL]   Let me get your mailing address.

VERIFY SPELLING FOR EACH ITEM.

("STREET ADDRESS/PO BOX:" STRING [50]
"CITY": STRING [50]
"STATE:" STRING [2]
"ZIP:" STRING [9])

LF150a [**LFBSTPHN**]   What is the best phone number to use to reach you now?   In a few weeks, someone may be contacting you to verify the quality of my work.
("PHONE:" STRING [12])

"NOTE: ENTER RESPONDENT'S CURRENT HOME PHONE NUMBER OR THE NUMBER WHERE HE/SHE CAN BE REACHED MOST OFTEN."

{allow 12, including pre-filled hyphens (xxx-xxx-xxxx)}

IF LF150A NE DK OR RF, ASK LF150B AND LF105C. THEN GO TO LF 155.

LF150b. [**LFDAYPHN**]   Is this your day or evening phone number?
("DAY",
"EVENING",
"BOTH")

LF150c. [**LFWHTPHN**]   Is this your home phone number, a work number, or some other number?

("HOME NUMBER",
"WORK NUMBER",
"FRIEND/RELATIVE'S NUMBER",
"BEEPER/PAGER/CELL PHONE NUMBER",
"OTHER (SPECIFY):" STRING [30]

{IF LF150a [LFBSTPHN] = RF or DK, skip to note before LF215 [LFGVENAM].}

LF155. [**LFHAVOTH**]   Is there another phone number, beeper, or pager number to use to reach you?
YESNO

{IF LF155 [LFHAVOTH] = 2 (NO) GO TO INSTRUCTIONS BEFORE LF215 [LFGVENAM]; ELSE CONTINUE}

LF160a. [**LFOTHPHN**]   What is that number?

("PHONE:" STRING [12])

REFUSED…………………………………RF (LF215BX)
DON'T KNOW……………………………..DK (LF215BX)

"NOTE: IF RESPONDENT HAS MORE THAN 1 ALTERNATIVE NUMBER, ENTER THE ONE SHE CAN BE REACHED AT MOST OFTEN."

{allow 12, including pre-filled hyphens (xxx-xxx-xxxx)}

LF160b. [**LFOTHDAY**]   And is that your day or evening number?

("DAY",
"EVENING",
"BOTH")

LF160c. [**LFWHTPH2**]   Is this your home phone number, a work number, or some other number?

("HOME NUMBER",
"WORK NUMBER",
"FRIEND/RELATIVE'S NUMBER",
"BEEPER/PAGER/CELL PHONE NUMBER",
"OTHER (SPECIFY):" STRING [30])

LF250.   "Thank you very much for this information and for your participation in this interview.

         PRESS ENTER TO CONTINUE."

LF260PRE.

DISPLAY INSTRUCTIONS:
If twin in household, display "$60" and "BOOKS."
Else display "$30" and "BOOK".

            AT THE END OF THE HOME VISIT, REMEMBER TO:

         1.   PAY PARENT {$30/$60}

         2.   GIVE {CHILD/CHILDREN} {BOOK/BOOKS}.

         3.   OBTAIN A SIGNED INCENTIVE RECEIPT FORM.

LF270. [LFLANG]
                 IN WHAT LANGUAGE WAS THIS INTERVIEW CONDUCTED?

                 ENGLISH...................................…………………………….1
                 ARABIC..2
                 CHINESE..…..……3
                 FILIPINO LANGUAGE (E.G. TAGALOG, ILOCANO, ETC.).4
                 FRENCH..5
                 GERMAN..………6
                 GREEK...…..……….7
                 ITALIAN...……..…….……8
                 JAPANESE...………9
                 KOREAN...10
                 POLISH..11
                 PORTUGUESE...12
                 SPANISH...13
                 VIETNAMESE...14
                 AFRICAN...15
                 EAST EUROPEAN……...............................………..16
                 NATIVE AMERICAN..17
                 SIGN LANGUAGE..18
                 MIDDLE EASTERN.......................................………19
                 WEST EUROPEAN...20
                 INDIAN SUBCONTINENT...21
                 SOUTHEAST ASIAN...22

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                    PACIFIC ISLAND.............................................................23
                    COMBINATION ENGLISH AND SPANISH.......................24
                    OTHER..............................................................................91
```

If child in HH and CM160B = yes then ask TEAConsent
If child in HH and CM060B = yes then ask CCPConsent

TEAConsent
YOU SAID EARLIER THAT YOU WOULD BE OBTAINING TEACHER CONSENT FOR {CHILDNAME}
FROM THE LEGAL GUARDIAN.
HAVE YOU OBTAINED THE LEGAL GUARDIAN'S SIGNATURE ON THE **LEGAL GUARDIAN
PERMISSION TO CONTACT CHILD'S TEACHER IN THE ECLS-B KINDERGARTEN 2007 ROUND**
FORM AND LETTER?
IF YOU HAVE NOT EXHAUSTED ALL ATTEMPTS TO OBTAIN LEGAL GUARDIAN CONSENT, USE
ALT-X TO BREAKOFF.


```
                    YES………………………………1
                    NO………………………………..2
                    REFUSED……………………….RF
                    DON'T KNOW………………….DK
```

Display if TEAConsent=2:

WITHOUT SIGNED CONSENT, WE WILL NOT BE ABLE TO CONTACT THE TEACHER.
PLEASE VERIFY YOUR RESPONSE. PRESS 'S' IF YOU WERE **NOT** ABLE TO OBTAIN THE LEGAL
GUARDIAN'S CONSENT FOR THE TEACHER INTERVIEW.

CCPConsent
YOU SAID EARLIER THAT YOU WOULD BE OBTAINING WECEP CONSENT FOR {CHILD} FROM
THE LEGAL GUARDIAN. HAVE YOU OBTAINED THE LEGAL GUARDIAN'S SIGNATURE ON THE
**LEGAL GUARDIAN PERMISSION TO CONTACT THE WRAP-AROUND EARLY CARE AND
EDUCATION PROVIDER (WECEP) IN THE ECLS-B KINDERGARTEN 2007 ROUND** AND THE **LEGAL
GUARDIAN WECEP NOTIFICATION LETTER**?

IF YOU HAVE NOT EXHAUSTED ALL ATTEMPTS TO OBTAIN LEGAL GUARDIAN CONSENT, USE
ALT-X TO BREAKOFF.

```
                    YES………………………………1
                    NO………………………………..2
                    REFUSED……………………….RF
                    DON'T KNOW………………….DK
```


If twin in HH and CM160B = yes then go back and ask TEAConsent
If twin in HH and CM060B = yes then go back and ask CCPConsent

If child or twin in HH and either of child or twin CM065 = yes or CM060a = yes or CCPConsent = yes then
ask Have_WECEP

HAVE_WECEP

ALERT: UPON EXITING THE PARENT INTERVIEW, {e_w_fill} WILL BE SPAWNED FOR THIS <u>CASE!</u>

VERIFY THAT YOU HAVE {FormFill} FOR {CHILD {AND TWIN}.

     - CONFIRM THAT THE CORRECT VERSION OF THE FORM WAS USED (TOP COPY IS
     WHITE, IDENTIFIER AT BOTTOM SAYS C4)
     - AFFIX BAR CODE LABEL TO FORM(S).
     - SHIP WHITE AND YELLOW COPIES TO RTI ALONG WITH HOME VISIT MATERIALS.

VERIFY THAT YOU HAVE {LetterFill} FOR {CHILD {AND TWIN}.

     - CONFIRM THAT THE CORRECT VERSION OF THE LETTER WAS USED (LETTER IS
     WHITE, IDENTIFIER AT BOTTOM SAYS L2)
     - COMPLETE PROJECT PROVIDED ENVELOPE FOR MAILING NOTIFICATION LETTER TO
     PROVIDER (2 IF TWINS)
     - MAIL LETTER TO PROVIDER

IF YOU HAVE ANY QUESTIONS ABOUT WHICH FORMS TO USE OR THINK THAT THE COMPUTER
HAS MADE AN ERROR IN SPAWNING, PLEASE CONTACT YOUR FS BEFORE LEAVING THE
HOME.

I HAVE READ THIS SCREEN AND UNDERSTAND THESE INSTRUCTIONS……………..3

Display {e_w_fill} = ' A WECEP '
Display {FormFill} = '<u>A SIGNED</u> PARENT PERMISSION TO CONTACT WECEP FORM{S} {FOR BOTH
CHILD AND TWIN}
Display {ELetterFill} = '<u>A COMPLETED</u> WECEP NOTIFICATION LETTER {FOR BOTH CHILD AND
TWIN}

or

Display {e_w_fill} = ' A WECEP '
Display {FormFill} = ' A <u>SIGNED</u> LEGAL GUARDIAN PERMISSION TO CONTACT THE WRAP-
AROUND EARLY CARE AND EDUCATION PROVIDER (WECEP) IN THE ECLS-B KINDERGARTEN
2007 ROUND FORM{S} {FOR BOTH CHILD AND TWIN}
Display {ELetterFill} = 'A <u>COMPLETED</u> LEGAL GUARDIAN WECEP NOTIFICATION LETTER FOR
{BOTH CHILD AND TWIN}

If child or twin in HH and either of child or twin CM165 = yes or CM160a = yes or TeaConsent = yes then
ask HaveTeach

HAVETEACH

ALERT: {Tea_1_2Fill} WILL BE CREATED FOR THIS <u>CASE!</u>

VERIIFY THAT YOU HAVE {TEACHfill} FOR {CHILD AND {TWIN}}

     -CONFIRM THAT THE CORRECT VERSION OF THE FORM WAS USED (TOP COPY IS
     GOLD)
     -AFFIX BAR CODE LABEL TO FORM(S).
     -SHIP GOLD AND YELLOW COPIES TO RTI ALONG WITH HOME VISIT MATERIALS.

VERIFY THAT YOU HAVE {TLetterFill} FOR {CHILD AND {TWIN}}

-CONFIRM THAT THE CORRECT VERSION OF THE LETTER WAS USED (TOP COPY IS GOLD)
-AFFIX BARCODE LABEL TO LETTER(S).
-SHIP GOLD AND YELLOW COPIES TO RTI ALONG WITH HOME VISIT MATERIALS - **DO NOT MAIL TO <u>TEACHER.</u>**

IF YOU HAVE ANY QUESTIONS ABOUT WHICH FORMS TO USE OR THINK THAT THE COMPUTER HAS MADE AN ERROR IN SPAWNING, PLEASE CONTACT YOUR FS BEFORE LEAVING THE HOME.

I HAVE READ THIS SCREEN AND UNDERSTAND THESE INSTRUCTIONS……………5

DISPLAY {tea_1_2Fill} = 'A TEACHER INTERVIEW'
DISPLAY {TeachFill} = '<u>A COMPLETED</u> PARENT PERMISSION TO CONTACT TEACHER FORM{S} FOR {BOTH CHILD AND TWIN}
DISPLAY {TLetterFill} = '<u>A COMPLETED</u> TEACHER NOTIFICATION LETTER FOR {BOTH CHILD ANDTWIN}

IF { teacher for child, but not for twin }
DISPLAY {Tea_1_2Fill} = ' A TEACHER INTERVIEW '
DISPLAY {TeachFill} = 'A COMPLETED PARENT PERMISSION TO CONTACT TEACHER FORM FOR {CHILD}
DISPLAY {TLetterFill} = 'A COMPLETED TEACHER NOTIFICATION LETTER FOR {CHILD}

IF { no TEACHER for child, but one for twin }

DISPLAY {Tea_1_2Fill} = ' A TEACHER INTERVIEW '
DISPLAY {TeachFill} = 'A COMPLETED PARENT PERMISSION TO CONTACT TEACHER FORM FOR {TWIN}
DISPLAY {TLetterFill} = 'A COMPLETED TEACHER NOTIFICATION LETTER FOR {TWIN}

IF RESPONDENT IS NOT LEGAL GURADIAN:

DISPLAY {tea_1_2Fill} = 'TEACHER INTERVIEW '
DISPLAY {TeachFill} = '<u>A SIGNED</u> LEGAL GUARDIAN PERMISSION TO CONTACT CHILD'S TEACHER IN THE ECLS-B KINDERGARTEN 2007 ROUND FORM FOR {BOTH CHILD AND TWIN}
DISPLAY {TLetterFill} = '<u>A SIGNED LEGAL GUARDIAN WECEP NOTIFICATION LETTER FOR {BOTH CHILD ANDTWIN}

IF { teacher for child, but not for twin }
DISPLAY {Tea_1_2Fill} = ' A TEACHER INTERVIEW '
DISPLAY {TeachFill} = ''<u>A SIGNED</u> LEGAL GUARDIAN PERMISSION TO CONTACT CHILD'S TEACHER IN THE ECLS-B KINDERGARTEN 2007 ROUND FORM FOR {CHILD}
DISPLAY {TLetterFill} = ' <u>A SIGNED</u> LEGAL GUARDIAN WECEP NOTIFICATION LETTER FOR {CHILD}

IF { no TEACHER for child, but one for twin }

DISPLAY {Tea_1_2Fill} = ' A TEACHER INTERVIEW '
DISPLAY {TeachFill} = ''<u>A SIGNED</u> LEGAL GUARDIAN PERMISSION TO CONTACT CHILD'S TEACHER IN THE ECLS-B KINDERGARTEN 2007 ROUND FORM FOR {TWIN}
DISPLAY {TLetterFill} = ' <u>A SIGNED</u> LEGAL GUARDIAN WECEP NOTIFICATION LETTER FOR {TWIN}

LF280. [COMMENTS]   IF THERE WERE ANY UNUSUAL CIRCUMSTANCES WHILE CONDUCTING THE
INTERVIEW WHICH MIGHT AFFECT THE DATA COLLECTED, PLEASE
DESCRIBE THEM HERE.

[String length: 250.]

PRESS THE [INSERT] KEY TO OPEN THE COMMENT BOX.

AFTER YOU'VE ENTERED YOUR COMMENT, PRESS ALT-S TO CLOSE COMMENT BOX.

Review

<u>END OF INTERVIEW.</u>

IF THE INTERVIEW IS FINISHED, ENTER '1' TO SAVE THE INTERVIEW AS FINAL.

IF THE INTERVIEW IS NOT FINISHED, ENTER '2' TO SAVE THE INTERVIEW AS A BREAK-OFF.

INTERVIEW FINISHED……………………………..1
BREAK-OFF………………………………………….2