

Evaluation of the DC Opportunity Scholarship Program

Parent Questionnaire

Spring 2008

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Responses to this data collection will be used only for statistical purposes. The reports prepared for this study will summarize findings across the sample and will not associate responses with a specific district or individual. We will not provide information that identifies you or your district to anyone outside the study team, except as required by law.

Your child's name is listed on the cover. Please write his or her name here: _____ . When you read "your child," please think about this child only.

Where the terms "child" and "children" have been used in this questionnaire this means children of all ages – from 5-18

Please answer every question.

Part 1: About Your Child
This section asks questions about the child listed on the cover.

Q1. What is the child's date of birth:

D	D	M	M	Y	Y	Y	Y	Y	Y

Q2. Please provide the following information for the school(s) this child attended for the 2007-08 school year:

	School Name	School Type (✓ Check one)	Grade	Months Attended (Between September 2007 and June 2008)
School 1		<input type="checkbox"/> ¹ Neighborhood (assigned) public school <input type="checkbox"/> ² Public school (unassigned) (e.g., magnet school or other neighborhood) <input type="checkbox"/> ³ Public charter school <input type="checkbox"/> ⁴ Private, religious school <input type="checkbox"/> ⁵ Private, non-religious school		
School 2		<input type="checkbox"/> ¹ Neighborhood (assigned) public school <input type="checkbox"/> ² Public school (unassigned) (e.g., magnet school or other neighborhood) <input type="checkbox"/> ³ Public charter school <input type="checkbox"/> ⁴ Private, religious school <input type="checkbox"/> ⁵ Private, non-religious school		

Q3. How far in school do you expect your child to go?
(✓ Check one)

- Some high school, but will not graduate..... 1
- Complete high school..... 2
- Attend but did not complete a 2-year college..... 3
- Attend but did not complete a 4-year college..... 4
- Obtain an associate's degree (AA, AS) or a certificate..... 5
- Obtain a bachelor's degree..... 6
- Obtain a master's degree or other higher degree..... 7
- Not sure..... 8

Q4a. In the last month, approximately how many days did this child:
(□ Check one)

- | | None | 1-2 Days | 3-4 Days | 5 or more days | Don't Know |
|---------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| a. Miss school..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 |

Q4b. In the last month, approximately how many days did this child:
(□ Check one)

- | | None | 1-2 Days | 3-4 Days | 5 or more days | Don't Know |
|--|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| a. Come to school ½ hour or more late..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 |

Q5. During the past year, was this child ever suspended from school for disciplinary reasons?

- No..... 1
- Yes..... 2
- Don't know..... 3

Q6. On average, how long does it take this child to get from home to school each morning?
(✓ Check one)

- Under 10 minutes..... 1
- 11-20 minutes..... 2
- 21-30 minutes..... 3
- 31-45 minutes..... 4
- 46 minutes to an hour..... 5
- More than one hour..... 6

Q7. Does this child:

	(✓ Check one)		If Yes, how well does this child's school attend to the particular needs of this child? (✓ Check one)		
	Yes	No	Very well	Adequately	Poorly
a. Have any physical disabilities?.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵
b. Have any learning disabilities?.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵
c. Speak a language other than English as a primary language?.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵

Q8. Does your child receive any of the following services?

(✓ Check all that apply)

	Yes	No
a. Before-school care.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
b. After-school care.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
c. Tutoring in school.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
d. Tutoring outside of school.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²

Part 2: Questions about This Child's School

Q9. How satisfied are you with the following aspects of this child's current school?

(✓ Check one box per row)

	Very dissatisfied	Dissatisfied	Satisfied	Very Satisfied	Does not apply
a. Location of school.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	
b. School safety.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	
c. Class sizes.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	
d. School facilities.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	
e. Respect between teachers and students.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	
f. How much teachers inform parents of students' progress.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	
g. How much students can observe religious traditions'.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	
h. Parental support for the school.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	
i. Discipline.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	
j. Academic quality.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	
k. Racial mix of students.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	
l. Services for students with special needs.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵

Q10. How serious are the following problems at this child's school?
 (✓ Check one on each row)

	Very serious	Somewhat serious	Not serious
a. Kids destroying property.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
b. Kids being late for school.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
c. Kids missing classes.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
d. Fighting.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
e. Cheating.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
f. Racial conflict.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
g. Guns or other weapons.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
h. Drug distribution.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
i. Drug and alcohol use.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
j. Availability of textbooks/supplies.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
k. Availability of computers.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
l. Teacher absenteeism.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³

Q11. What overall grade would you give this child's current school?
 (✓ Check one)

- Excellent (A)..... ¹
- Good (B)..... ²
- Fair (C)..... ³
- Unsatisfactory (D)..... ⁴
- Failing (F)..... ⁵

Q12. During this school year (2007-08), how often did you do the following in this child's school:
 (✓ Check one box on each row)

	Never	Once	2 or 3 times	4 or more times
a. Attend parent-teacher conferences.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
b. Volunteer in the school.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
c. Attend a PTA (or other similar organization meeting).....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
d. Receive report cards about this child's performance.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
e. Receive information about this child's school, such as newsletters and school notices.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
f. Receive notification if the child was sent to the office for disruptive behavior.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
g. Accompany students on class trips.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴

Q13. In the past MONTH, how often did you do the following?
 (✓ Check one box on each row)

	Never	Once	2 or 3 times	4 or 5 times	6 or more times
a. Help this child with his or her homework.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵
b. Help this child with reading or math that was not part of his or her homework.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵
c. Talk to this child about his or her experience in school.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵
d. Work with child on school project.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵

Part 3: Questions about choosing schools and the DC Opportunity Scholarship Program

Q14. What was **the most important consideration** in your choice of schools for this child for this school year?

	Mark Only One
a. Location of school.....	<input type="checkbox"/> ¹
b. School safety.....	<input type="checkbox"/> ²
c. Class sizes.....	<input type="checkbox"/> ³
d. School facilities.....	<input type="checkbox"/> ⁴
e. Respect between students and teachers.....	<input type="checkbox"/> ⁵
f. How much teachers inform parents of students' progress...	<input type="checkbox"/> ⁶
g. How much students can observe religious traditions.....	<input type="checkbox"/> ⁷
h. Parental involvement in the schools.....	<input type="checkbox"/> ⁸
i. Discipline.....	<input type="checkbox"/> ⁹
j. Academic quality.....	<input type="checkbox"/> ¹⁰
k. Racial mix of students.....	<input type="checkbox"/> ¹¹
l. Services for students with special needs.....	<input type="checkbox"/> ¹²

Q15. What was **the second most important consideration** in your choice of schools for this child for this school year?

Mark Only One

-
- | | |
|--|-----------------------------|
| a. Location of school..... | <input type="checkbox"/> 1 |
| b. School safety..... | <input type="checkbox"/> 2 |
| c. Class sizes..... | <input type="checkbox"/> 3 |
| d. School facilities..... | <input type="checkbox"/> 4 |
| e. Respect between students and teachers..... | <input type="checkbox"/> 5 |
| f. How much teachers inform parents of students' progress... | <input type="checkbox"/> 6 |
| g. How much students can observe religious traditions..... | <input type="checkbox"/> 7 |
| h. Parental involvement in the schools..... | <input type="checkbox"/> 8 |
| i. Discipline..... | <input type="checkbox"/> 9 |
| j. Academic quality..... | <input type="checkbox"/> 10 |
| k. Racial mix of students..... | <input type="checkbox"/> 11 |
| l. Services for students with special needs..... | <input type="checkbox"/> 12 |

Q16. What was **the third most important consideration** in your choice of schools for this child for this school year?

Mark Only One

-
- | | |
|--|-----------------------------|
| a. Location of school..... | <input type="checkbox"/> 1 |
| b. School safety..... | <input type="checkbox"/> 2 |
| c. Class sizes..... | <input type="checkbox"/> 3 |
| d. School facilities..... | <input type="checkbox"/> 4 |
| e. Respect between students and teachers..... | <input type="checkbox"/> 5 |
| f. How much teachers inform parents of students' progress... | <input type="checkbox"/> 6 |
| g. How much students can observe religious traditions..... | <input type="checkbox"/> 7 |
| h. Parental involvement in the schools..... | <input type="checkbox"/> 8 |
| i. Discipline..... | <input type="checkbox"/> 9 |
| j. Academic quality..... | <input type="checkbox"/> 10 |
| k. Racial mix of students..... | <input type="checkbox"/> 11 |
| l. Services for students with special needs..... | <input type="checkbox"/> 12 |

Q17. Do you plan to send this child to the same school next year?

- No..... 1
Yes..... 2 (Go to question 19)

Q18. Why will the child not be attending the same school next year?
 (✓ Check all that apply)

- a. The school is in an inconvenient location..... 01
- b. The school is too expensive..... 02
- c. The child was offered admission to a preferred private school..... 03
- d. The child was offered admission to a preferred public school..... 04
- e. My child was not comfortable at the school..... 05
- f. I want all of my children to be in the same school..... 06
- g. The quality of the teachers was unacceptable..... 07
- h. I am concerned about school safety..... 08
- i. The coursework was too difficult..... 09
- j. The coursework was too easy..... 10
- k. The discipline/rules were too strict..... 11
- l. The discipline/rules were too easy..... 12
- m. I did not feel the teachers were providing enough academic support for my child..... 13
- n. The child was asked not to return..... 14
- o. The child is graduating to another school..... 15
- p. The school did not meet the child's special needs..... 15
- q. The child moved out of DC..... 16

Q19. What was **the most important reason** for why you applied for a DC Opportunity Scholarship for this child?

- | | Mark Only One |
|--|----------------------------|
| a. So my child could be in a school with better academics..... | <input type="checkbox"/> 1 |
| b. So my child could be in a school that is in a more convenient location..... | <input type="checkbox"/> 2 |
| c. So my child could be in a school that is safer..... | <input type="checkbox"/> 3 |
| d. So my child could be with a different group of friends..... | <input type="checkbox"/> 4 |
| e. So my child could receive religious instruction..... | <input type="checkbox"/> 5 |
| f. So my child could be in a school with a different racial/ethnic mix..... | <input type="checkbox"/> 6 |
| g. So my child could be in a school with strict rules for behavior..... | <input type="checkbox"/> 7 |
| h. Because the DC Opportunity Scholarship offers more scholarship money than other scholarship programs..... | <input type="checkbox"/> 8 |
| i. Because the DC Opportunity Scholarship money was available | <input type="checkbox"/> 9 |

Q20. What was **the second most important reason** for why you applied for a DC Opportunity Scholarship for this child?

Mark Only One

-
- | | |
|--|----------------------------|
| a. So my child could be in a school with better academics..... | <input type="checkbox"/> 1 |
| b. So my child could be in a school that is in a more convenient location..... | <input type="checkbox"/> 2 |
| c. So my child could be in a school that is safer..... | <input type="checkbox"/> 3 |
| d. So my child could be with a different group of friends..... | <input type="checkbox"/> 4 |
| e. So my child could receive religious instruction..... | <input type="checkbox"/> 5 |
| f. So my child could be in a school with a different racial/ethnic mix..... | <input type="checkbox"/> 6 |
| g. So my child could be in a school with strict rules for behavior..... | <input type="checkbox"/> 7 |
| h. Because the DC Opportunity Scholarship offers more scholarship money than other scholarship programs..... | <input type="checkbox"/> 8 |
| i. Because the DC Opportunity Scholarship money was available | <input type="checkbox"/> 9 |

Q21. What was **the third most important reason** for why you applied for a DC Opportunity Scholarship for this child?

Mark Only One

-
- | | |
|--|----------------------------|
| a. So my child could be in a school with better academics..... | <input type="checkbox"/> 1 |
| b. So my child could be in a school that is in a more convenient location..... | <input type="checkbox"/> 2 |
| c. So my child could be in a school that is safer..... | <input type="checkbox"/> 3 |
| d. So my child could be with a different group of friends..... | <input type="checkbox"/> 4 |
| e. So my child could receive religious instruction..... | <input type="checkbox"/> 5 |
| f. So my child could be in a school with a different racial/ethnic mix..... | <input type="checkbox"/> 6 |
| g. So my child could be in a school with strict rules for behavior..... | <input type="checkbox"/> 7 |
| h. Because the DC Opportunity Scholarship offers more scholarship money than other scholarship programs..... | <input type="checkbox"/> 8 |
| i. Because the DC Opportunity Scholarship money was available | <input type="checkbox"/> 9 |

Q22. Did this child get an offer of a scholarship to attend a private school through the DC Opportunity Scholarship program?
(✓ Check one)

- a. **No**, This child did not get an offer of a scholarship..... ¹ (Go to question 26)
- b. **Yes**, This child did get an offer of a scholarship and this child used the scholarship..... ² (Go to question 23)
- c. **Yes**, this child did get an offer of a scholarship but this child did not use the scholarship..... ³ (Go to question 25)

Q23. Did this child transfer to another school during the 2007-08 school year?

- No..... ¹ (Go to question 26)
- Yes..... ² (Go to question 24)

Q24. Why did this child leave the private school he/she attended?
(✓ Check all that apply)

- a. This child did not like that private school..... ⁰¹
- b. The work at that private school was too hard..... ⁰²
- c. The work at that private school was too easy..... ⁰³
- d. It was too hard to get my child to that private school each day. . ⁰⁴
- e. The discipline/rules were too strict at that private school..... ⁰⁵
- f. This child was unable to make friends in that private school..... ⁰⁶
- g. The religious activities at that private school made my child uncomfortable..... ⁰⁷
- h. This child wanted to return to his/her friends in public school. . . ⁰⁸
- i. This child liked his/her public school better than that private school..... ⁰⁹
- j. There was another private school this child liked better..... ¹⁰
- k. This child did not get the academic support he/she needed at that private school..... ¹¹

Q25. Why did this child not use the offer of the scholarship?
(✓ Check all that apply)

- a. This child did not want to leave his/her friends in public school..... 01
- b. This child's public school has sports that the private school(s) did not..... 02
- c. This child thought the work might be too hard in the private school(s)..... 03
- d. There was no space at the participating private school this child wanted to attend..... 04
- e. The private school(s) this child was interested in were too far from home or too hard to get to..... 05
- f. This child's public school teachers are better..... 06
- g. This child got into a charter school..... 07
- h. This child did not want to be held back a grade..... 08
- i. This child did not want to have religious instruction..... 09
- j. This child did not have to wear a uniform in public school..... 10
- k. This child did not pass the private school's admission test..... 11
- l. The private school(s) did not have the services for this child's learning or physical disability or other special needs..... 12
- m. The private school this child wanted to attend was not participating..... 13
- n. This child moved out of DC..... 14

Part 4: Questions about the Child's Parents or Legal Guardian

Q26. Who is the primary female guardian for this child:
(✓ Check one)

- Child's birth mother..... 1
- Child's stepmother..... 2
- Child's grandmother..... 3
- Other female (please specify on the line)
..... 4
- Child has no female guardian..... 5

Q27. Who is the primary male guardian for this child:
(✓ Check one)

- Child's birth father..... 1
- Child's stepfather..... 2
- Child's grandfather..... 3
- Other male (please specify on the line)
..... 4
- Child has no male guardian..... 5

Q28. Who is completing this questionnaire? Please mark your relationship to the child:
(✓ Check one)

- Child's primary female guardian..... ¹
- Child's primary male guardian..... ²
- Other (please specify on the line)
_____..... ³

Q29. Please mark the HIGHEST level of education that **you** completed
(✓ Check one)

- Beyond eighth grade, not high school graduation..... ¹
- Eighth grade or less..... ²
- GED..... ³
- High School Graduation..... ⁴
- Less than two years of college..... ⁵
- Two year degree from any vocational, trade, or
business school..... ⁶
- Two or more years of college..... ⁷
- Finish college (four or five year degree)..... ⁸
- Master degree or higher degree..... ⁹

Q30. How many years have you lived in your current residence?
(✓ Check one box)

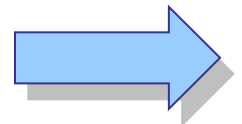
- Less than 3 months..... ¹
- 3-11 months..... ²
- 1-2 years..... ³
- More than 2 years..... ⁴

Q31. Do you currently have a job outside the home, either full-time or part-time?
(✓ Check one box)

- Yes, a full time job (35+ hours)..... ¹
- Yes, a part time job (less than 35 hours)..... ²
- Not working now, but looking for work..... ³
- Not working now and not looking for work..... ⁴
- Don't know..... ⁵

Q32. How many years and months have you worked, either part-time or full-time, since leaving school?

____ Years ____ Months



Part 5: Contact Information

Please Provide Your Current Contact Information:

Last Name: _____ First Name: _____ MI: _____

Address: _____

Phone number _____

Email Address: _____

Additional Contact Information

Please provide the names and addresses for three people who are likely to know the whereabouts of the child in the future. The contact people listed do not have to be family members and can be friends and/or neighbors of the family.

Contact Information for:

Last Name: _____ First Name: _____ MI: _____

Address: _____

Phone number _____

Email Address: _____

Relationship to child: _____

Contact Information for:

Last Name: _____ First Name: _____ MI: _____

Address: _____

Phone number _____

Email Address: _____

Relationship to child: _____

Contact Information for:

Last Name: _____ First Name: _____ MI: _____

Address: _____

Phone number _____

Email Address: _____

Relationship to child: _____

Thank you for completing the survey.