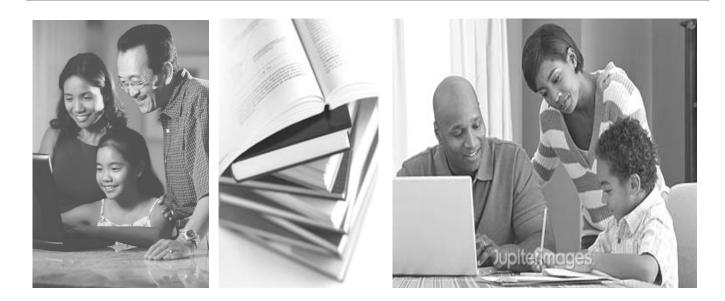
The National Household Education Survey

A Survey About Homeschooling in America



Thank you for helping us with this survey. Based on the information we received from your household in your last survey, we're asking you to complete this final step.

Sponsored by

U.S. Department of Education National Center for Education Statistics



Instructions

- In response to the survey you answered earlier, we recorded that the child/youth listed below is currently homeschooled for at least some classes. If this child attends public or private school instead of homeschooling, or is not homeschooled for kindergarten through 12th grade or equivalent, please call us at the toll-free number below so we can be sure you received the correct survey.
- These questions should be filled in by a parent or guardian who knows about:

Please answer all the survey questions thinking about this child or youth.

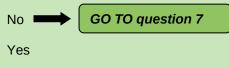
- ◆ To answer a question, simply mark Imes the box that best represents your answer.
- Please use a black or blue pen, if available to complete this survey.
- If this questionnaire has been sent to the wrong household or the child/youth listed above does not live here, please call to let us know.
- Our toll-free number is 1-888-880-3033.

We are authorized to collect this information by Section 9543, 20 US Code. You do not have to provide the information requested. However, the information you provide will help the Department of Education's ongoing efforts to learn more about the educational experiences of children and families. There are no penalties should you choose not to participate in this study. Your answers may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose except as required by law (Section 9573, 20 US Code). Your responses will be combined with those from other participants to produce summary statistics and reports.

This survey is estimated to take an average of 20 minutes, including time for reviewing instructions, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Andrew Zukerberg National Center for Education Statistics, U.S. Department of Education, 1990 K Street NW, Room 9036, Washington, DC 20006-5650. Do not return the completed form to this address.

1. Child's Homeschooling

- Thank you for your help with the previous survey your household completed.
- Answer all the survey questions thinking about the child listed below:
- 1. Who is the person that <u>mainly</u> provides this child's <u>home</u> instruction?
 - Mother
 - Father
 - Grandparent
 - Brother/sister
 - Another person
 - ➡ Who is that? _____
- 2. Is any of this child's <u>home</u> instruction provided by a private tutor or teacher?
 - No
 - Yes
- 3. Is any of this child's instruction provided by a local homeschooling group or co-op?
 - No
 - Yes
- 4. Does this child attend a public or private school or a college or university for instruction?



5. What type of school(s) does this child attend?

Mark X all that apply.

- Public school (K-12)
- Private school (K-12)
- College, community college, or university
- 6. How many <u>hours</u> each <u>week</u> does this child usually go to a school for instruction? Do not include time spent in extracurricular activities.



]
 7. What grade or year would this child be in if he/she was attending school? Mark ONE only. Kindergarten Grade (1 through 12) 	 11. Thinking about sources of curriculum or books you use to homeschool this child, please tell us about <u>all</u> the sources that apply to you. Since September, have you used materials from Mark ONE box for each item below.
 8. These next questions ask you to <u>estimate</u> the amount of time you homeschool this child. A. How many days each week is this child homeschooled? days each week 	No Yes ▼ ▼ a. A public library? □ b. A homeschooling catalog, □ publisher, or individual who specializes in homeschooling materials? □ c. Another educational publisher? □
 B. About how many total hours <u>each week</u> is <u>he/she homeschooled?</u> hours per week 9. Since September, has this child participated in activities with other children who are homeschooled? 	d. A homeschooling organization?
 No Yes 10. Which of the following statements best describes the teaching style used to homeschool this child? Mark ONE only. We strictly follow a formal curriculum. We mostly follow a formal curriculum, but place uses informal lagrange (i.e., shild lade 	 (including online)? i. Websites, excluding retailers? j. Other source— Specify: 12. In the past year, have you or another family member taken any courses, either online or in-person, to help you prepare your child's home instruction? No
 also use informal learning (i.e. child-led learning, "teaching moments"). We mostly use informal learning, but sometimes use a formal curriculum. We always use informal learning, and never follow a formal curriculum. 	 Yes, both online and in-person Yes, online only Yes, in-person only

Is th follo	Yes at instruction provided by any of th owing places?
follo	
Mar	
	k 🔀 all that apply.
	Your local public school
	A charter school
	Another public school
	A private school
	A college, community college, or university
	Offered by my state
	Someplace else—Specify:
	nere a charge or fee for that ruction?
	No
	Yes

16. Thinking about typical grade levels, for which grades was this child schooled at home for at least some classes or subjects?

Mark X all that apply.

Include the current year.

Elementary through Middle school

Kindergarten (Including transitional K and Pre-first grade)

First grade

Second grade

Third grade

Fourth grade

Fifth grade

Sixth grade

Seventh grade

Eighth grade

High School

Ninth grade - freshman

Tenth grade - sophomore

Eleventh grade - junior

Twelfth grade - senior

 17. There are many different reasons that parents choose to homeschool their children. Did your family choose to homeschool this child because: Mark ONE box for each item below. No Yes 	 18. Of the reasons your family chose to homeschool this child, which one would you say is the most important to you? Write the letter from question 17 for the most important reason you chose to homeschool your child. letter from question 17
 a. You are concerned about the school environment, such as safety, drugs, or negative peer pressure? b. You are dissatisfied with the academic instruction at other schools? c. You prefer to teach this child at home so that you can provide religious instruction? d. You prefer to teach this child at home so that you can provide moral instruction? e. This child has a physical or mental health problem that has lasted six months or more? f. This child has a temporary illness that prevents him/her from going to school? g. This child has other special needs that you feel the school can't or won't meet? h. You are interested in a nontraditional approach to children's education? i. You have another reason for homeschooling your child? 	 19. How far do you expect this child to go in his/her education? Mark ONE only. Complete less than a high school diploma Graduate from high school Attend a vocational or technical school after high school Attend two or more years of college Earn a bachelor's degree Earn a graduate degree or professional degree beyond a bachelor's

L

20. Thinking about all years this child has been homeschooled, which of the following subject areas has this child been taught during his or her home instruction?

Mark \bigotimes all that apply.

	Art
	Music
	Basic algebra (Algebra I)
	Advanced algebra (Algebra II)
	Geometry
	Calculus
	Probability
	Scientific inquiry or experiments
	Earth sciences or geology
	Biology
	Chemistry or physics
	Geography
	English or literature
compute	Computer science (e.g., programming)
studies	Social science, history, social
	Foreign language
Continue wi the next pag	th Section 2, question 21 on e.

Fam		
		-

21. In the past <u>week</u> , has anyone family done the following things child?		
Mark $oxtimes$ ONE box for each item be	low.	
	No ▼	Yes ▼
a. Told him/her a story		
(Do not include reading to this child.)		
 b. Done activities like arts and crafts, coloring, painting, pasting, 		
or using clay		
c. Played board games or did puzzles with him/her		
d. Worked on a project like building, making, or fixing something		
e. Played sports, active games, or exercised together		
f. Discussed with him/her how to manage time		
g. Talked with him/her about the family's history or ethnic heritage		
22. In the past <u>week</u> , how many days family eaten the evening meal tog		
Write '0' if none.		
days		

23. In the past <u>month</u>, has anyone in your family done the following things with this child?

Ma	rk 🛛	ONE	box fo	r each	item	below
----	------	-----	--------	--------	------	-------

		No	Yes
a.	Visited a library		
b.	Visited a bookstore		
C.	Gone to a play, concert, or other live show		
d.	Visited an art gallery, museum, or historical site		
e.	Visited a zoo or aquarium		
f.	Attended an event sponsored by a community, religious, or ethnic group		
g.	Attended an athletic or sporting event outside of school in which this child was not a player		
or as	bes your family participate in meetings of a <u>local</u> homesch sociation, co-op, or other loc meschool group? No CO TO questic	ooling al	
or as	meetings of a <u>local</u> homesch sociation, co-op, or other loc meschool group?	ooling al	
or as hc 25. Si fa th as	meetings of a <u>local</u> homesch sociation, co-op, or other loc meschool group? No GO TO question	ooling al on 26 nes ha icipat noolin	as your ed in
25. Si fa th as ho 26. Is	meetings of a <u>local</u> homesch sociation, co-op, or other loc meschool group? No Yes nce September, how many tin mily gone to meetings or part e activities of a local homescl sociation, co-op, or other loc meschool group?	ooling al nes ha icipat noolin al ur	as your ed in

Yes

3. Child's Healt	h						
27. In general, how would you desc child's health?	cribe th	is		id you mark lestion 28?	<u>yes</u> to any co		n in
Excellent				No 🗪	GO TO question	37	
Very good			F	Yes			
Good			20.10	this shild ros	oiving convisor fo	r hic/h	or
Fair				ndition?	eiving services fo	r nis/n	er
Poor				No 🗪	GO TO question	35	
	:	المماط	F	Yes			
Has a health or education profe you that this child has any of th conditions?				re these servi llowing sourc	ces provided by a ces?	ny of t	he
Mark 🗙 ONE box for each item b	elow.				ox for each item bel	OW.	
	No ▼	Yes ▼				No	Vee
. A specific learning disability						No ▼	Yes ▼
An orthopedic impairment			a.	Your local sch	ool district		
A speech or language impairment			b.		l health or social y	🗆	
A serious emotional disturbance			c.		c, or other health		
Deafness or another hearing impairment							
Blindness or another visual					e services provide ed Educational Pro		
impairment not corrected with glasses				No 🗪	GO TO question		
J. Intellectual disabilities				Yes			
Autism			₽		n your household v	work	vith
Pervasive Developmental Disorder or PDD			th		vider or school to		
Attention deficit disorder, ADD or ADHD				No			
<. Developmental delays				Yes			
. Traumatic brain injury							
Another health impairment		_					

ha wi	uring this school year, to what extent we you been satisfied or dissatisfied th the following aspects of this child's P?
a.	The service provider's or school's communication with your family?
	Very satisfied
	Somewhat satisfied
	Somewhat dissatisfied
	Very dissatisfied
	Does not apply
b.	The child's special needs teacher or therapist?
	Very satisfied
	Somewhat satisfied
	Somewhat dissatisfied
	Very dissatisfied
	Does not apply
c.	The service provider's or school's ability to accommodate the child's special needs?
	Very satisfied
	Somewhat satisfied
	Somewhat dissatisfied
	Very dissatisfied
	Does not apply
d.	The service provider's or school's commitment to help your child learn?
	Very satisfied
	Somewhat satisfied

Somewhat dissatisfied

Very dissatisfied

Does not apply

35. Is this child currently enrolled in any special education classes or services?

No

Yes

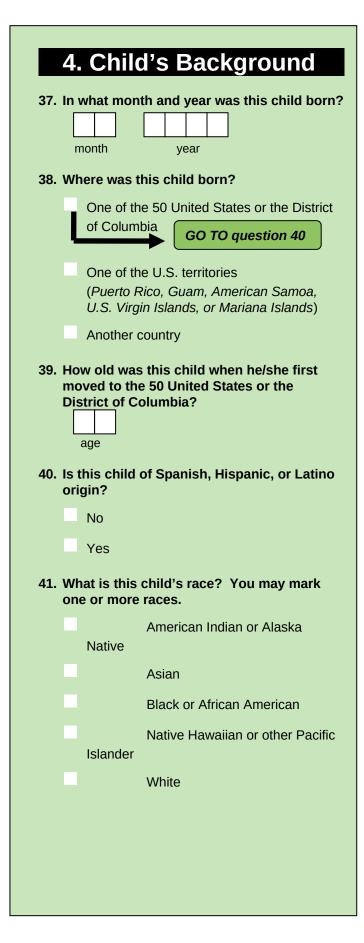
36. Does this child's condition interfere with his/her ability to do any of the following things?

Mark oxtimes ONE box for each item below.

Child no longer has condition

		No	Yes
		▼	▼
a.	Learn?		
b.	Participate in sports, clubs, or other organized activities?		
C.	Attend school on a regular basis?		
d.	Make friends?		

 Continue with Section 4, question 37 on the next page.



- 42. For this school year, does this child usually live at this address or another address (for example because of a joint custody arrangement)?
 - Do not include vacation properties.

Child usually lives at this address

Child usually lives at another address

43. What language does this child speak most at home?

Mark 🛛 ONE only.



Spanish

A language other than English or Spanish

English and Spanish equally

English and another language equally

- 44. Is this child currently enrolled in English as a second language, bilingual education, or an English immersion program?
 - No

Yes

 Continue with Section 5, question 45 on the next page.

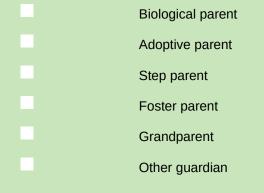
5. Child's Family

PARENT 1 LIVING IN HOUSEHOLD-

Answer questions 45 to 61 about yourself if you are the child's parent or guardian.

If you are not the child's parent or guardian, answer questions 45 to 61 about one of this child's parents or guardians living in the household.

45. Is this parent or guardian the child's...



46. Is this person male or female?

- Male
- Female
- 47. What is the current marital or partner status of this parent or guardian?

Mark \boxtimes ONE only.

- Married
- In a registered domestic partnership or civil union
- Living with a partner
- Separated
- Divorced
- Widowed
- Never married

48. What was the <u>first</u> language this parent or guardian learned to speak?

Mark 🗙 ONE only.

English	GO TO question 50
---------	-------------------

- Spanish
- A language other than English or Spanish
- English and Spanish equally
- English and another language equally
- 49. What language does this person speak most at home <u>now</u>?

Mark 🛛 ONE only.

- English
- Spanish
- A language other than English or Spanish
- English and Spanish equally
- English and another language equally

50. Where was this parent or guardian born?

- One of the 50 United States or the District of Columbia
 - GO TO question 52

One of the U.S. territories (Puerto Rico, Guam, American Samoa, U.S. Virgin Islands, or Mariana Islands)

- Another country
- **51.** How old was this person when he or she first moved to the 50 United States or the District of <u>Columbia</u>?

age	

52. Is this person of Spanish, Hispanic, or Latino origin?

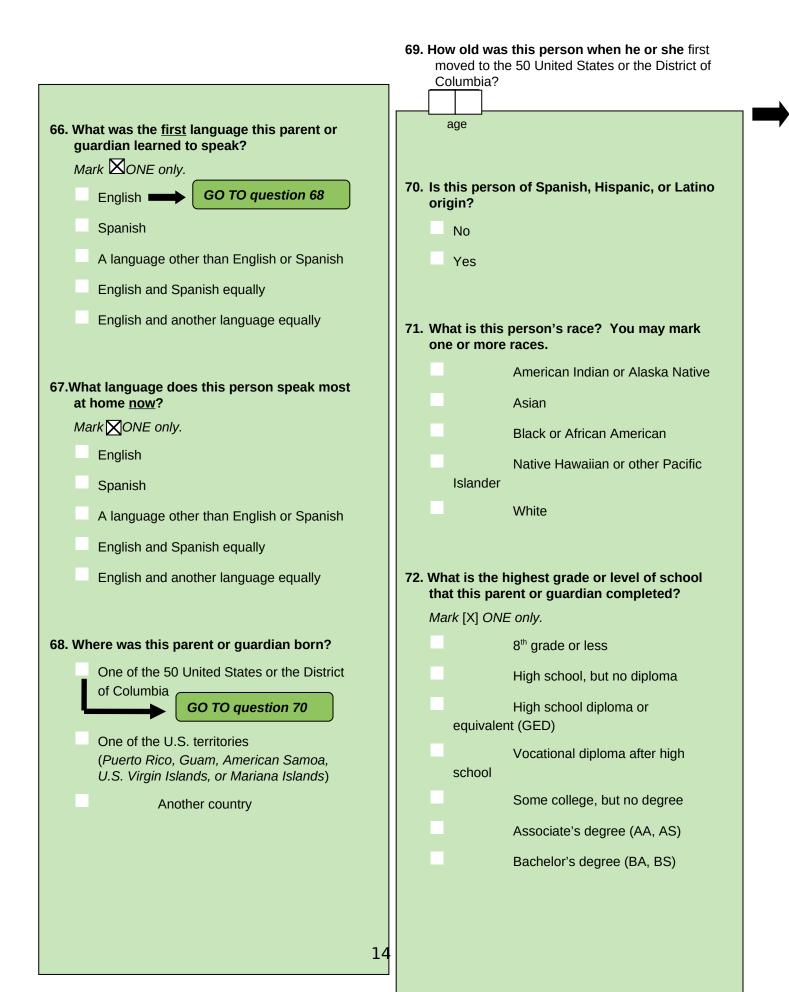
No

Yes 53. What is this person's race? You may mark one or more races. American Indian or Alaska Native Asian Black or African American Native Hawaiian or other Pacific Islander White 54. What is the highest grade or level of school that this parent or guardian completed? Mark 🗙 ONE only. 8th grade or less High school, but no diploma High school diploma or equivalent (GED) Vocational diploma after high school Some college, but no degree Associate's degree (AA, AS) Bachelor's degree (BA, BS) Some graduate or professional education but no degree Master's degree (MA, MS) Doctorate degree (PhD, EdD) Professional degree beyond Bachelor's degree (MD, DDS, JD, LLB)

55. Is he or she currently attending or enrolled in a school, college, university, or adult learning center, or receiving vocational education or job training?

		No
		Yes
56.		e following best describes this nployment status?
	Mark 🔀 ON	
		Employed for pay or income
		Self employed
		Unemployed or
	out of w	
	parent	Stay at home
	Retired	GO TO question 59
	Disable	d or
	unable t	o work
57.	(If employe	d or self employed) About how
	many hours	s <u>per week</u> does he or she <u>usually</u> by or income, counting all jobs?
	many hours	s <u>per week</u> does he or she <u>usually</u>
	many hours work for pa	s <u>per week</u> does he or she <u>usually</u> y or income, counting all jobs?
58.	many hours work for pa	s <u>per week</u> does he or she <u>usually</u> y or income, counting all jobs? GO TO question 59
58.	many hours work for pa hours	s <u>per week</u> does he or she <u>usually</u> by or income, counting all jobs? <i>GO TO question 59</i> By ed or out of work) Has this uardian been actively looking for
58.	many hours work for pa hours	s <u>per week</u> does he or she <u>usually</u> by or income, counting all jobs? <i>GO TO question 59</i> byed or out of work) Has this uardian been actively looking for <u>past 4 weeks</u> ?
58.	many hours work for pa hours	s <u>per week</u> does he or she <u>usually</u> by or income, counting all jobs? <i>GO TO question 59</i> yed or out of work) Has this uardian been actively looking for <u>past 4 weeks</u> ? No
58.	many hours work for pa hours	s <u>per week</u> does he or she <u>usually</u> by or income, counting all jobs? <i>GO TO question 59</i> byed or out of work) Has this uardian been actively looking for <u>past 4 weeks</u> ?
58.	many hours work for pa hours	s <u>per week</u> does he or she <u>usually</u> by or income, counting all jobs? <i>GO TO question 59</i> yed or out of work) Has this uardian been actively looking for <u>past 4 weeks</u> ? No
58.	many hours work for pa hours	s <u>per week</u> does he or she <u>usually</u> by or income, counting all jobs? <i>GO TO question 59</i> yed or out of work) Has this uardian been actively looking for <u>past 4 weeks</u> ? No

59. <u>In the past 12 months</u> , how many months (if any) has this person worked for pay or	
income?	PARENT 2 LIVING IN HOUSEHOLD -
Months	Answer questions 62 to 79 about a second parent
	or guardian living in the household.
	62. Is there a second parent or guardian living in this household?
	GO TO question 80
	Yes
	63. Is this person the child's
60. How old is this person?	Biological parent
	Adoptive parent
Age	Step parent
	Foster parent
61. How old was this person when he or she first became a parent to <u>any</u> child?	Grandparent
	Other guardian
Age	64. Is this person male or female?
	Male
Don't know	Female
	65.What is the current marital or partner status
	of this parent or guardian?
	Mark 🖾 ONE only.
	Married
	In a registered domestic partnership or civil union
	Living with a partner
	Separated
	Divorced
	Widowed
	Never married
	13



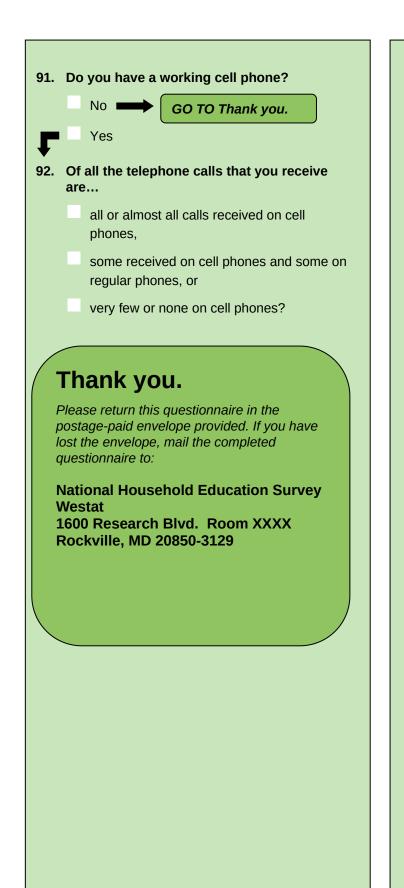
Some graduate or professional education but no degree

education but no degree		76.	(If unemployed or out of work) Has this
Master's degree (MA, MS)			parent or guardian been actively looking for work in the past 4 weeks?
Doctorate degree (PhD, EdD)			No
Professional degree beyond Bachelor's degree (MD, DDS, JD, LLB)			Yes
73. Is he or she currently attending or enrolled in a school, college, university, or adult learning center, or receiving vocational education or job training?		77.	In the past 12 months, how many months (if any) has this person worked for pay or income?
Yes		78.	How old is this person?
74. Which of the following best describes this person's employment status?			
Mark \square ONE only.		79.	How old was this person when he or she first became a parent to <u>any</u> child?
Employed for pay or income			
Self employed			Age
Unemployed ar out of work GO TO question 76			Don't know
Stay at home parent Retired Disabled or unable to work		۲	Continue with Section 6, question 80 on the next page.
 75. (If employed or self employed) About how many hours <u>per week</u> does he or she <u>usually</u> work for pay or income, counting all jobs? GO TO question 77 	15		

6. Your Household 80. Including yourself, how many total people live in this household?	 82. How are you related to this child? Mark ONE only. Mother (birth, adoptive, step, or foster) Father
people	(<i>birth, adoptive, step, or foster</i>) Aunt
81. Other than the parents or guardians already reported, how many of the following people live in the household with this child? Write '0' if none.	Uncle Grandmother
Example:	Grandfather
Brother(s) 2	Parent's girlfriend/ boyfriend/ partner Other relationship – Specify:
This child's Number Brother(s)	
Sister(s)	83. What language(s) are spoken at home by the adults in this household?
Aunt(s) Uncle(s) Grandmother(s)	Mark 🔀 all that apply. English
Grandfather(s)	Spanish or Spanish Creole French (including Patois, Creole, Cajun)
Cousin(s)	Chinese Other languages – Specify:
Other relative(s)	
Other nonrelative(s).	 84. Is this house Mark ONE only. Owned or being bought by someone in this household,
	Rented by someone in this household, or

Occupied by some other arrangement?

85. Other than this address does anyone in this household currently receive mail at another	87. Which category best fits the total income of all persons in your household over the past 12 months?
address including P.O. Boxes?	Include your own income.
No	Include money from jobs or other earnings,
Yes	pensions, interest, rent, Social Security payments, and so on.
	\$0 to \$10,000
86. In the <u>past 12 months</u> , did your family ever receive benefits from any of the following	\$10,001 to \$20,000
programs?	\$20,001 to \$30,000
Mark 🔀 ONE box for each item below.	\$30,001 to \$40,000
No Yes ▼ ▼	\$40,001 to \$50,000
a. Temporary Assistance for Needy Families, or TANF	\$50,001 to \$60,000
b. Your state welfare or family	\$60,001 to \$75,000
c. Women, Infants, and Children,	\$75,001 to \$100,000
or WIC	\$100,001 to \$150,000
d. Food Stamps	\$150,001 or more
e. Medicaid	
f. Child Health Insurance Program (CHIP)	88. How many years have you lived at this address?
9. Section 8 Housing assistance	Write '0' if less than 1 year.
	years at this address
	89. Do you have access to the internet at this address?
	No
	Yes
	90. Is there at least one telephone inside this home that is currently working and not a cell phone?
	No
	Yes



Commonly Asked Questions

Q: How did you get my address?

A: Your address was randomly selected from among all of the home addresses in the nation. It was selected using scientific sampling methods to represent other households in the U.S.

Q: Why should I take part in this study? Do I have to do this?

A: You represent thousands of other households like yours, and you cannot be replaced. Your answers and opinions are very important to the success of this study. You may choose not to answer any or all questions in this survey. In order for the survey to be representative it is important that you complete and return this questionnaire.

Q: How will the information I provide be used?

A: Your responses will be combined with those of others to produce statistical summaries and reports. Your individual data will not be reported. Your answers may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose except as required by law (Section 9573, 20 U.S. Code).

Q: How will my response help the Department of Education?

A: The Department of Education wants to understand the condition of education in the United States. This survey is the only way that the Department of Education can learn about homeschooling from your perspective. It is the Department of Education's primary source of information on homeschooling in America. Your responses will be combined with those from other households to inform educators, policy makers, schools and universities about changes in the condition of education in the United States. Reports from past surveys can be found at http://nces.ed.gov/nhes.

Q: I have more than one child in my household. Will I receive additional surveys for the other children in my household?

A: No, each household will receive a survey for only one child, even if there are multiple children living in the household. In households with multiple children, one child was randomly selected to be included in the study.

Q: Who is sponsoring the study? Is this study conducted by the Federal Government?

A: The National Center for Education Statistics, within the Department of Education, is authorized to conduct this study (Section 9543, 20 U.S. Code). Westat has been contracted to conduct this study. This study has been approved by the Office of Management and Budget, the office that reviews all federally sponsored surveys. The approval number assigned to this study is 1850-0768. You may send any comments about this survey, including its length, to the Federal Government. Write to: Andrew Zukerberg, National Center for Education Statistics, U.S. Department of Education, 1990 K Street NW, Room 9036, Washington, DC 20006-5650. You may send e-mail to info@nhessurvey.org.

Q: Who is Westat?

A: Westat is a research company located in Rockville, Maryland. Westat is conducting this survey under contract to the U.S. Department of Education. If you have any questions about the study contact Westat toll-free at 1-888-880-3033.