Parent Interview

Early Childhood Longitudinal Study, Kindergarten Class of 2010–11

Fall-First Grade

BOX 1

IF THE CASE IS A CONTINUING HOUSEHOLD (HAS A COMPLETE PARENT INTERVIEW FROM FALL K, SPRING K, OR BOTH), GO TO INQ.005.

ELSE, IF THE CASE IS A NON-RESPONSE HOUSEHOLD (THE CASE DID NOT HAVE A COMPLETE PARENT INTERVIEW IN FALL OR SPRING OF KINDERGARTEN). GO TO INQ.040.

INQ.005   Last {fall/spring}, we spoke with {NAME OF RESPONDENT} who took part in the Early Childhood Longitudinal Study, Kindergarten Class of 2010-2011 on {DATE OF LAST INTERVIEW}. Am I talking to the same person?

VERIFY NAME, AGE AND RELATIONSHIP WITH RESPONDENT:
NAME: {FIRST NAME} {LAST NAME}.
AGE: APPROXIMATELY {UPDATED AGE FROM FALL/SPRING} YEARS OLD.
RELATIONSHIP TO CHILD: {RELATIONSHIP TO CHILD}.

ENTER "1" FOR YES EVEN IF THE AGE LISTED IS A YEAR OR TWO DIFFERENT FROM THE AGE OF THE RESPONDENT IF YOU HAVE CONFIRMED IT IS THE SAME PERSON.

CAPI INSTRUCTION: DISPLAY "fall" IF THE LAST COMPLETED PARENT INTERVIEW WAS IN THE FALL OF KINDERGARTEN. DISPLAY "spring" IF THE LAST COMPLETED INTERVIEW WAS IN THE SPRING OF KINDERGARTEN.

CAPI INSTRUCTION: FOR "NAME OF RESPONDENT" DISPLAY FIRST AND LAST NAME OF PREVIOUS ROUND RESPONDENT FROM PRELOAD. USE THE NAME OF PERSONTYPE=R.

CAPI INSTRUCTION: FOR "FIRST NAME" AND "LAST NAME" DISPLAY PREVIOUS ROUND RESPONDENT'S FIRST AND LAST NAME FROM THE PRELOAD. FOR "UPDATED AGE FROM FALL/SPRING" DISPLAY AGE OF PREVIOUS ROUND RESPONDENT FROM PRELOAD. FOR "RELATIONSHIP TO CHILD" DISPLAY RELATIONSHIP OF PREVIOUS ROUND RESPONDENT TO CHILD FROM PRELOAD.

CAPI INSTRUCTION: FLAG THE RESPONDENT IN THE HOUSEHOLD ROSTER AND SET A FLAG CALLED "FLAGS.SAMERESP" THAT EQUALS 1 IF INQ.005 = 1.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW DISALLOWED.

YES...1 (INQ.090)
NO..2 (INQ.010)
YES, SAME PERSON, BUT CHILD LIVES
ELSEWHERE NOW...3 (CMQ.701)

INQ.010   May I please speak with {NAME OF PREVIOUS ROUND RESPONDENT}

CAPI INSTRUCTION: DISPLAY FIRST AND LAST NAME OF RESPONDENT FROM FALL KINDERGARTEN.

CAPI INSTRUCTION: IF INQ.010 = 1, HARD ERROR CHECK SHOULD READ:

PLEASE GO BACK TO THE PREVIOUS QUESTION (INQ.005) TO VERIFY THE RESPONDENT.

PRESS G TO GO BACK NOW.

PRESS C TO CANCEL.

AVAILABLE..1 (INQ.005)

NOT AVAILABLE BUT WILL BE BEFORE END

OF FIELD PERIOD (CALLBACK APPT.)............................2 (CMQ.702)

NOT AVAILABLE IN FIELD PERIOD..................................3 (INQ.015)

CHILD LIVES ELSEWHERE..4 (CMQ.701)

REFUSED 8 (INQ.015)

DON'T KNOW 9 (INQ.015)

INQ.015   Are you the parent or guardian in this household who knows the most about {CHILD}'s care, education, and health?

NOTE: TO ANSWER "1" FOR "YES," THE PARENT OR GUARDIAN SHOULD LIVE IN THE SAME HOUSEHOLD AS THE CHILD FOR THE MAJORITY OF THE YEAR, HAVE JOINT CUSTODY OF THE CHILD, OR BE THE ADULT WHO SPENDS THE MOST TIME WITH THE CHILD WHEN THE CHILD IS NOT IN A GROUP HOME. IF YOU ARE NOT SPEAKING TO THIS PERSON NOW, CODE "2" FOR "NO." IF THE CHILD DOES NOT LIVE THERE NOW, CODE "3" FOR "CHILD LIVES ELSEWHERE."

YES... 1 (INQ.030)

NO... 2 (INQ.020)

CHILD LIVES ELSEWHERE......................... 3 (CMQ.701)

REFUSED 8 (INQ.020)

DON'T KNOW 9 (INQ.020)

INQ.020   May I please speak with the parent or guardian in the household who knows the most about {CHILD}'s care, education, and health?

NOTE: THE PARENT OR GUARDIAN SHOULD LIVE IN THE SAME HOUSEHOLD AS THE CHILD FOR THE MAJORITY OF THE YEAR, HAVE JOINT CUSTODY OF THE CHILD, OR BE THE ADULT WHO SPENDS THE MOST TIME WITH THE CHILD WHEN THE CHILD IS NOT IN A GROUP HOME. IF THIS PERSON IS AVAILABLE AND YOU CAN SPEAK TO HIM/HER NOW, CODE "1". IF YOU NEED TO CALL BACK AND THE PARENT OR GUARDIAN WILL BE AVAILABLE IN THE FIELD PERIOD, CODE "2". IF THE PARENT OR GUARDIAN IS NOT AVAILABLE IN THE FIELD PERIOD, CODE "3" TO ASK FOR SOMEONE ELSE. IF THERE IS NOT A PARENT OR GUARDIAN IN THE HOUSEHOLD WHO KNOWS THE MOST ABOUT THE CHILD'S CARE, EDUCATION, AND HEALTH, CODE "4". IF THE CHILD DOES NOT LIVE THERE NOW, CODE "5" FOR "CHILD LIVES ELSEWHERE."

AVAILABLE..1 (INQ.030)
NOT AVAILABLE BUT WILL BE BEFORE END
OF FIELD PERIOD (CALLBACK APPT.).. 2 (CMQ.702)
NOT AVAILABLE IN FIELD PERIOD..3 (INQ.025)
NO PARENT OR GUARDIAN IN HH KNOWS ABOUT CHILD.............. 4 (INQ.025)
CHILD LIVES ELSEWHERE.. 5 (CMQ.701)
REFUSED 8 (INQ.025)
DON'T KNOW 9 (INQ.025)

INQ.025   May I please speak with a household member who is 18 or older and knows about {CHILD}'s care, education, and health?
NOTE: THE RESPONDENT SHOULD LIVE IN THE SAME HOUSEHOLD AS THE CHILD FOR THE MAJORITY OF THE YEAR, HAVE JOINT CUSTODY OF THE CHILD, OR BE THE ADULT WHO SPENDS THE MOST TIME WITH THE CHILD WHEN THE CHILD IS NOT IN A GROUP HOME. IF THIS PERSON IS ON THE PHONE, CODE "1". IF YOU NEED TO CALL BACK AND THIS PERSON WILL BE AVAILABLE IN THE FIELD PERIOD, CODE "2". IF THIS PERSON IS NOT AVAILABLE IN THE FIELD PERIOD, CODE "3". IF THERE IS NOT AN ADULT IN THE HOUSEHOLD WHO KNOWS ABOUT THE CHILD'S CARE, EDUCATION, AND HEALTH, CODE "4". IF THE CHILD DOES NOT LIVE THERE NOW, CODE "5" FOR "CHILD LIVES ELSEWHERE."

PERSON ON PHONE..1 (INQ.030)
NOT AVAILABLE BUT WILL BE BEFORE END
OF FIELD PERIOD (CALLBACK APPT)...2 (CMQ.702)
NOT AVAILABLE IN FIELD PERIOD...3 (CMQ.703)
NO ADULT IN HH KNOWS ABOUT CHILD.....................................4 (CMQ.703)
CHILD LIVES ELSEWHERE..5 (CMQ.701)
REFUSED 8 (CMQ.703)
DON'T KNOW 9 (CMQ.703)

INQ.030   May I have your name please?

                         SELECT NAME FROM LIST BELOW.

                         IF THE NAME IS ON THE LIST OF HOUSEHOLD MEMBERS, ENTER THE NUMBER NEXT TO THE
                         PERSON ON THE HOUSEHOLD ROSTER WHO WILL BE THE CURRENT ROUND RESPONDENT.
                         SELECT THIS PERSON'S NAME EVEN IF THE AGE LISTED IS A YEAR OR TWO DIFFERENT
                         FROM THE AGE OF THE RESPONDENT.

                         VERIFY NAME, RELATIONSHIP, AND AGE WITH RESPONDENT.

                         IF NAME NOT LISTED, ENTER 0.

                         CAPI INSTRUCTIONS:
                             1.   DISPLAY THE UPDATED HOUSEHOLD ROSTER WITH AGE, GENDER, AND
                                   RELATIONSHIP FROM THE PRELOAD. AT THE TOP OF THE ROSTER, DISPLAY
                                   "0 NOT ON LIST." NEXT TO AGE, DISPLAY THE WORD "APPROXIMATELY".

                             2.   DISPLAY HOUSEHOLD MEMBERS 15 YEARS OR OLDER AS RESPONSE
                                   CATEGORIES (IN CASE OF RESPONDENT/INTERVIEWER ERROR EARLY IN
                                   THE INTERVIEW, INCLUDE THE PREVIOUS ROUND RESPONDENT IN THIS
                                   DISPLAY EVEN THOUGH HE/SHE SHOULD HAVE BEEN SELECTED AT
                                   INQ.005).

                             3.   IF THE PREVIOUS ROUND RESPONDENT IS SELECTED AT THIS SCREEN
                                   (EVEN THOUGH HE/SHE SHOULD HAVE BEEN SELECTED AT INQ.005), SET
                                   "FLAGS.SAMERESP" =1 AND GO TO INQ.090.

                             4.   IF ZERO IS ENTERED, GO TO INQ.060. ELSE, IF IT IS A CONTINUUING
                                   HOUSEHOLD BUT A NEW RESPONDENT WHO WAS ALREADY IN THE
                                   HOUSEHOLD MATRIX, GO TO INQ.080.

                             5.   DISALLOW DK AND RF.

                             6.FLAG THE RESPONDENT.

INQ.040   (As I mentioned earlier), you and {CHILD} have been selected to take part in the Early Childhood Longitudinal Study, Kindergarten Class of 2010-2011, which is sponsored by the U.S. Department of Education, National Center for Education Statistics. I have some questions for you that ask about {CHILD}'s school and home experiences. The information I collect in this interview will be extremely valuable in understanding the development of young children and how their early school experiences can be improved. The interview should take about 15 minutes.

All responses that relate to or describe identifiable characteristics of individuals may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose, unless otherwise compelled by law.

This call will be recorded for quality control purposes.

>   CONTINUE WITH RECORDING…………..1 (BOX 2)
>   CONTINUE WITHOUT RECORDING……..2 (INQ.040b)

INQ.040b   THIS INTERVIEW IS NOT BEING RECORDED.

IF NEEDED: That's fine. This interview will not be recorded.

PRESS 1 AND ENTER TO CONTINUE.

BOX 2
IF INQ.040 HAS BEEN ASKED TWICE, GO TO INQ.060. ELSE, GO TO INQ.041.

INQ.041   Are you the parent or guardian in this household who knows the most about {CHILD}'s care, education, and health?

NOTE: TO ANSWER "1" FOR "YES," THE PARENT OR GUARDIAN SHOULD LIVE IN THE SAME HOUSEHOLD AS THE CHILD FOR THE MAJORITY OF THE YEAR, HAVE JOINT CUSTODY OF THE CHILD, OR BE THE ADULT WHO SPENDS THE MOST TIME WITH THE CHILD WHEN THE CHILD IS NOT IN A GROUP HOME. IF YOU ARE NOT SPEAKING TO THIS PERSON NOW, CODE "2" FOR "NO." IF THE CHILD DOES NOT LIVE THERE NOW, CODE "3" FOR "CHILD LIVES ELSEWHERE."

>   YES... 1 (INQ.060)
>   NO.. 2 (INQ.042)
>   CHILD LIVES ELSEWHERE......................... 3 (CMQ.701)
>   REFUSED 8 (INQ.042)
>   DON'T KNOW 9 (INQ.042)

INQ.042   May I please speak with the parent or guardian in the household who knows the most about {CHILD}'s care, education, and health?

NOTE: THE PARENT OR GUARDIAN SHOULD LIVE IN THE SAME HOUSEHOLD AS THE CHILD FOR THE MAJORITY OF THE YEAR, HAVE JOINT CUSTODY OF THE CHILD, OR BE THE ADULT WHO SPENDS THE MOST TIME WITH THE CHILD WHEN THE CHILD IS NOT IN A GROUP HOME. IF THIS PERSON IS AVAILABLE AND YOU CAN SPEAK TO HIM/HER NOW, CODE "1". IF YOU NEED TO CALL BACK AND THE PARENT OR GUARDIAN WILL BE AVAILABLE IN THE FIELD PERIOD, CODE "2". IF THE PARENT OR GUARDIAN IS NOT AVAILABLE IN THE FIELD PERIOD, CODE "3" TO ASK FOR SOMEONE ELSE. IF THERE IS NOT A PARENT OR GUARDIAN IN THE HOUSEHOLD WHO KNOWS THE MOST ABOUT THE CHILD'S CARE, EDUCATION, AND HEALTH, CODE "4". IF THE CHILD DOES NOT LIVE THERE NOW, CODE "5" FOR "CHILD LIVES ELSEWHERE."

AVAILABLE..1 (INQ.040)
NOT AVAILABLE BUT WILL BE BEFORE END
OF FIELD PERIOD (CALLBACK APPT.)...2 (CMQ.702)
NOT AVAILABLE IN FIELD PERIOD..3 (INQ.043)
NO PARENT OR GUARDIAN IN HH KNOWS
ABOUT CHILD 4 (INQ.043)
CHILD LIVES ELSEWHERE...5 (CMQ.701)
REFUSED 8 (INQ.043)
DON'T KNOW 9 (INQ.043)

INQ.043   May I please speak with a household member who is 18 or older and knows about {CHILD}'s care, education, and health?

NOTE: THE RESPONDENT SHOULD LIVE IN THE SAME HOUSEHOLD AS THE CHILD FOR THE MAJORITY OF THE YEAR, HAVE JOINT CUSTODY OF THE CHILD, OR BE THE ADULT WHO SPENDS THE MOST TIME WITH THE CHILD WHEN THE CHILD IS NOT IN A GROUP HOME. IF THIS PERSON IS ON THE PHONE, CODE "1". IF YOU NEED TO CALL BACK AND THIS PERSON WILL BE AVAILABLE IN THE FIELD PERIOD, CODE "2". IF THIS PERSON IS NOT AVAILABLE IN THE FIELD PERIOD, CODE "3". IF THERE IS NOT AN ADULT IN THE HOUSEHOLD WHO KNOWS ABOUT THE CHILD'S CARE, EDUCATION, AND HEALTH, CODE "4". IF THE CHILD DOES NOT LIVE THERE NOW, CODE "5" FOR "CHILD LIVES ELSEWHERE."

PERSON ON PHONE...1 (INQ.060)
NOT AVAILABLE BUT WILL BE BEFORE END
OF FIELD PERIOD (CALLBACK APPT).. 2 (CMQ.702)
NOT AVAILABLE IN FIELD PERIOD..3 (CMQ.703)
NO ADULT IN HH KNOWS
ABOUT CHILD...4 (CMQ.703)
CHILD LIVES ELSEWHERE...5 (CMQ.701)
REFUSED 8 (CMQ.703)
DON'T KNOW 9 (CMQ.703)

INQ.060   {[}May I have your name, please?{]}
ENTER THE RESPONDENT'S FIRST NAME.
VERIFY SPELLING.
CAPI INSTRUCTION: DISPLAY "[" AND "]" IF INQ.030 WAS ASKED. ELSE, USE A NULL DISPLAY.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW DISALLOWED.

_____

FIRST NAME

INQ.070   [May I have your name, please?]

            ENTER LAST NAME.
            VERIFY SPELLING.

            CAPI INSTRUCTION: REFUSED AND DON'T KNOW DISALLOWED.
            _____

                                    LAST NAME

BOX 3

FOR NON-RESPONDENTS, GO TO INQ.130 AND ASK INQ130 THROUGH BOX 8. ELSE, GO TO INQ.080.

INQ.080   (As I mentioned earlier), you and {CHILD} were selected to take part in the Early Childhood Longitudinal
            Study Kindergarten Class of 2010-2011 last school year, which is sponsored by the U.S. Department of
            Education, National Center for Education Statistics. I have some questions for you that ask about
            {CHILD}'s school and home experiences. The information I collect in this interview will be extremely
            valuable in understanding the development of young children and how their early school experiences can
            be improved. The interview should take about 15 minutes.

            All responses that relate to or describe identifiable characteristics of individuals may be used only for
            statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose, unless
            otherwise compelled by law.

            This call will be recorded for quality control purposes.
                                    CONTINUE WITH RECORDING……….1 (BOX 4)
                                    CONTINUE WITHOUT RECORDING….2 (INQ.080b)

INQ.080b   THIS INTERVIEW IS NOT BEING RECORDED.

                    IF NEEDED: That's fine. This interview will not be recorded.
                    PRESS 1 AND ENTER TO CONTINUE.

BOX 4

FOR NEW FALL FIRST GRADE RESPONDENTS, GO TO INQ.130.

INQ.090   Last {fall/spring}, you and {CHILD} took part in the Early Childhood Longitudinal Study Kindergarten Class of 2010-2011, which is sponsored by the U.S. Department of Education, National Center for Education Statistics. I have some questions for you that ask about {CHILD}'s school and home experiences since our last interview. The information I collect in this interview will be extremely valuable in understanding the development of young children and how their early school experiences can be improved. The interview should take about 15 minutes.

All responses that relate to or describe identifiable characteristics of individuals may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose, unless otherwise compelled by law.

This call will be recorded for quality control purposes.

CAPI INSTRUCTION: DISPLAY "fall" IF THE LAST COMPLETED PARENT INTERVIEW WAS IN THE FALL OF KINDERGARTEN. DISPLAY "spring" IF THE LAST COMPLETED INTERVIEW WAS IN THE SPRING OF KINDERGARTEN.

CONTINUE WITH RECORDING……….1 (INQ.110)
CONTINUE WITHOUT RECORDING….2 (INQ.090b)

INQ.090b   THIS INTERVIEW IS NOT BEING RECORDED.

IF NEEDED: That's fine. This interview will not be recorded.

PRESS 1 AND ENTER TO CONTINUE.

INQ.110   I would like to verify the spelling of your name for our records. Is your first name spelled {FIRST NAME OF PREVIOUS ROUND RESPONDENT}?

CAPI INSTRUCTION: DISPLAY RESPONDENT'S FIRST NAME FROM FALL K.

YES…………………………………………… 1 (INQ.115)
NO……………………………………………… 2 (INQ.112)

INQ.112   How do you spell your first name?

VERIFY SPELLING.

INQ.115 [I would like to verify the spelling of your name for our records. Is your last name spelled] {LAST NAME OF PREVIOUS ROUND RESPONDENT}?

CAPI INSTRUCTION: DISPLAY RESPONDENT'S LAST NAME FROM FALL K.

YES…………………………………………… 1 (INQ.130)

NO……………………………………………… 2 (INQ.116)

INQ.116 How do you spell your last name?

VERIFY SPELLING.

INQ.130 Before we begin the interview, I would like to verify some information.

I have recorded {CHILD's FIRST, MIDDLE, AND LAST NAME} as {CHILD}'s full name. Is this correct?

ALSO VERIFY SPELLING.

MAKE CORRECTIONS TO NAME BELOW OR PRESS ENTER TO ACCEPT FIRST/MIDDLE/LAST NAME.

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

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS. HOWEVER, DO NOT ALLOW INTERVIEWER TO CHANGE 'REAL DATA' TO '8' (REFUSED) OR '9' (DON'T KNOW).

CAPI INSTRUCTION: FOR CHILD'S FIRST, MIDDLE, AND LAST NAME, DISPLAY CHILD'S FULL NAME FROM PRELOAD.

CAPI INSTRUCTION: USE PRELOAD LENGTH FOR CHILD'S NAME.

{CHILD'S FIRST NAME}
{CHILD'S MIDDLE NAME}
{CHILD'S LAST NAME}

FIRST NAME: [_____]
MIDDLE NAME: [_____]
LAST NAME: [_____]

BOX 5
IF (THIS IS A NON-RESPONSE CASE) OR (A CONTINUING CASE AND THE CHILD'S SEX IS MISSING), GO TO INQ.160. ELSE, IF THE CHILD'S DATE OF BIRTH IS MISSING, GO TO INQ.170. ELSE, GO TO INQ.180.

INQ.160   ASK IF NOT OBVIOUS: {I have {CHILD} recorded as {male/female}. Is that correct?}{/{Is {CHILD} male or female?}

{MAKE CORRECTIONS TO GENDER BELOW OR PRESS ENTER TO ACCEPT CURRENT GENDER.}

CAPI INSTRUCTION: DISPLAY CORRECTED INFORMATION ABOUT CHILD'S GENDER FROM PRELOAD. IF GENDER IS NONMISSING IN THE PRELOAD, DISPLAY "I have…{male/female}. Is that correct?" AND "MAKE CORRECTIONS TO GENDER BELOW OR PRESS ENTER TO ACCEPT CURRENT GENDER. DISPLAY "male" IF THE PRELOAD SHOWS THAT THE CHILD IS MALE, DISPLAY "female" IF THE PRELOAD SHOWS THAT THE CHILD IS FEMALE, AND NEXT TO "CURRENT INFO" BELOW, DISPLAY "MALE" IF THE CHILD IS MALE ACCORDING TO THE PRELOAD AND DISPLAY "FEMALE" IF THE CHILD IS FEMALE.

ELSE, IF GENDER IS MISSING IN THE PRELOAD, DISPLAY "Is {CHILD}…female?" AND USE A NULL DISPLAY FOR "MALE/FEMALE" NEXT TO "CURRENT INFO".

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED.

Current Info: [MALE/FEMALE]

MALE.…………………………………………… 1

FEMALE.……………………………………….2

BOX 6
IF (THIS IS A NON-RESPONSE CASE) OR (A CONTINUING CASE AND THE CHILD'S DATE OF BIRTH IS MISSING), GO TO INQ.170. ELSE, GO TO INQ.180.

INQ.170   {I have recorded that {CHILD} was born on {DATE OF BIRTH}. Is that correct?/What is {CHILD}'s date of birth?}

{MAKE CORRECTIONS TO DATE OF BIRTH BELOW OR PRESS ENTER TO ACCEPT CURRENT DATE OF BIRTH.}

CAPI INSTRUCTION: DISPLAY INFORMATION ABOUT CHILD'S DATE OF BIRTH FROM PRELOAD. DISPLAY THE NAME OF THE MONTH, NOT THE NUMBER OF THE MONTH, FOLLOWED BY THE DAY WITH THE APPROPRIATE LETTERS AT THE END TO GO WITH THE DATE, AND THEN THE YEAR (E.G., August 12th, 2005).

CAPI INSTRUCTION: IF DATE OF BIRTH IS NOT AVAILABLE IN THE PRELOAD, ENTRY FOR DATE OF BIRTH IS REQUIRED.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED.

CAPI INSTRUCTION: IF A DATE OF BIRTH IS AVAILABLE FOR THE FOCAL CHILD FROM THE PRELOAD, DISPLAY "I have recorded that {CHILD} was born on {DATE OF BIRTH}. Is that correct?" AND "MAKE CORRECTIONS … BIRTH."' ALSO, IF DATE OF BIRTH IS AVAILABLE IN THE PRELOAD, DISPLAY IT NEXT TO "CURRENT INFO" BELOW. OTHERWISE, IF DATE OF BIRTH IS NOT AVAILABLE IN THE PRELOAD, DISPLAY "What is {child}'s date of birth?" AND USE A NULL DISPLAY NEXT TO "CURRENT INFO".

CAPI INSTRUCTION: RANGE CHECK: 1-12 FOR MONTH, 1-31 FOR DAY, 2003-2006 FOR YEAR. IF MONTH IS OUT OF RANGE, DISPLAY ERROR MESSAGE "THE BIRTHDAY MONTH SHOULD BE BETWEEN 1 AND 12." IF DAY IS OUT OF RANGE, DISPLAY ERROR MESSAGE "THE BIRTHDAY DAY SHOULD BE BETWEEN 1 AND 31." IF YEAR IS OUT OF RANGE, DISPLAY ERROR MESSAGE "THE BIRTHDAY YEAR SHOULD BE IN THE RANGE OF 2003 – 2006. CONFIRM THE YEAR THE CHILD WAS BORN AND, IF STILL NOT IN RANGE, ENTER "DON'T KNOW" AND A COMMENT."

|___|___| / |___|___| / |___|___||___|___|
ENTER DATE OF BIRTH (MONTH/DAY/YEAR)

REFUSED ……….……….……….……….…… 88
DON'T KNOW ……….……….……….………. 99

BOX 7

IF ANY FIELD IN DATE OF BIRTH INQ.170 = REFUSED OR DK, GO TO INQ.176.

ELSE, CONTINUE WITH INQ.175.

INQ.175   So {CHILD} is {AGE CALCULATED FROM DATE OF BIRTH AT INQ.170} years old. Is that correct?
IF AGE IS INCORRECT, GO BACK TO INQ170 AND CORRECT DATE OF BIRTH.
IF AGE IS STILL INCORRECT, ANSWER "NO" TO THIS QUESTION (INQ175).

YES...1 (INQ.180)
NO...2 (INQ.176)
REFUSED ……….……….……….…………..8 (INQ.176)
DON'T KNOW ……….……….……….…………9 (INQ.176)

INQ.176   How old is {CHILD}?
           CAPI INSTRUCTION: RANGE CHECK 4-8.

           IF DK OR RF, DISPLAY "YOU MUST ENTER AN AGE FOR THE CHILD IF DATE OF BIRTH IS
           MISSING. IF THEIR RESPONDENT DOESN'T KNOW THE AGE, ASK FOR HIS/HER BEST GUESS. IF
           THE RESPONDENT REFUSES TO PROVIDE AN AGE, ENTER YOUR BEST GUESS OR A '6' IF YOU
           CAN'T GUESS AT THE CHILD'S AGE."

                                    REFUSED ……………………………………….…. 8
                                    DON'T KNOW .……….…………………….……… 9

INQ.180   {I have recorded that {CHILD}'s home address is:}/{What is {CHILD}'s home
            address?}

           {Is this still correct?}

                         STREET ADDRESS1: [_____]
                         STREET ADDRESS2: [_____]
                         CITY: [_____]
                         STATE: [_____]
                         ZIP CODE: [_____]

           {TYPE ADDRESS AND ENTER 1 FOR "YES, CORRECT ADDRESS."}

           CAPI INSTRUCTION: IN THE RESPONSE FIELD, DISPLAY CURRENT ADDRESS INFO FROM THE
           PRELOAD.

           CAPI INSTRUCTION: DISPLAY "I have …is" and "Is this still correct" IF DATA ARE AVAILABLE FROM
           THE PRELOAD.

           IF DATA ARE NOT AVAILABLE, display "What is …" and "TYPE ADDRESS…"

           CAPI INSTRUCTION: IF PREVIOUS DATA ARE NOT AVAILABLE FOR ADDRESS, ALLOW REFUSED
           AND DON'T KNOW IN ALL FIELDS.

                         YES, CORRECT ADDRESS.......................…………... 1 (INQ.200)
                         YES, SAME ADDRESS – MINOR
                            CORRECTIONS .………………………………….……2 (INQ.190)
                         NO, NEW ADDRESS .…………………………………….. 3 (INQ.190)

                                                              {HELP AVAILABLE}

INQ.190

Source: K1.INQ.110

MAKE CORRECTIONS TO ADDRESS BELOW.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CAPI INSTRUCTION: DISPLAY 'HELP AVAILABLE' WHEN ON STATE ENTRY FIELD. USE STATE ABBREVIATIONS AS HELP TEXT.

CAPI INSTRUCTION: DISPLAY CURRENT ADDRESS INFO IN THE RESPONSE FIELD.

<div align="center">

[STREET ADDRESS1]
[STREET ADDRESS2]
[CITY]
[STATE]
[ZIP CODE]

</div>

STREET ADDRESS1: [_____]
STREET ADDRESS2: [_____]
CITY: [_____]
STATE: [_____]
ZIP CODE: [_____]

INQ.200   {I have recorded that {PHONE NUMBER} is {CHILD}'s family's current home phone number. Is this correct?/What is {CHILD}'s family's current home phone number?}

IF NO TELEPHONE, ENTER '000'.

{TYPE TELEPHONE NUMBER AND ENTER 1 FOR "YES, CORRECT TELEPHONE NUMBER."}
CAPI INSTRUCTION: DISPLAY CURRENT PHONE NUMBER FROM PRELOAD.

CAPI INSTRUCTION: DISPLAY "I have recorded … correct?" IF A HOME PHONE NUMBER IS AVAILABLE FOR THIS CASE. OTHERWISE, DISPLAY "What is … phone number?" AND "TYPE… NUMBER."

CAPI INSTRUCTION: IF PREVIOUS DATA ARE NOT AVAILABLE FOR ADDRESS, ALLOW REFUSED AND DON'T KNOW IN ALL FIELDS.

YES, CORRECT TELEPHONE NUMBER…….…….. 1   (BOX 8)
YES, SAME TELEPHONE NUMBER – MINOR
   CORRECTIONS …………………………….…………2 (INQ.205)
NO, NEW TELEPHONE NUMBER ……….………….. 3 (INQ.205)

INQ.205   MAKE CORRECTIONS TO TELEPHONE NUMBER BELOW.

     CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

     CAPI INSTRUCTION: DISPLAY CURRENT TELEPHONE NUMBER IN THE RESPONSE FIELD.

       [CURRENT TELEPHONE NUMBER]

       TELEPHONE NUMBER: [_____]

      REFUSED 8
      DON'T KNOW 9

BOX 8
GO TO SECTION TUQ (TIME USE).

HELP AVAILABLE

TUQ.040 Some children go away during the summer for short periods of time to stay with relatives, to go to camp, or to go to other places. Please tell me, during the time that {CHILD} was out of regular school, how many weeks was {he/she} not staying with you, either at home or at another place?

ENTER NUMBER OF WEEKS.

HELP TEXT:

If child was away from parent on a regular basis a few days a week (e.g., every weekend), do not count this.

CAPI INSTRUCTION: HARD RANGE CHECK 0 – 16 WEEKS.

|___|___|
ENTER WEEKS

REFUSED 88
DON'T KNOW 99

BOX 1

- IF CHILD WAS AWAY FROM HOME AT LEAST A WEEK (TUQ.040 GE 1), GO TO TUQ.060.
- OTHERWISE, GO TO BOX 2.

TUQ.060 Where was {CHILD} when {he/she} was not with you?

CODE ALL THAT APPLY.

WITH A PARENT.. 1
WITH ANOTHER RELATIVE......................... 2
AT CAMP.. 3
SOME OTHER PLACE
(SPECIFY)_____.............. 91
REFUSED.. 8
DON'T KNOW.. 9

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┌─────────────────────────────────────────────────────────────────┐
│                            BOX 2                                  │
│                                                                   │
│        IF TUQ.060 IS CODED 91, CONTINUE WITH TUQ.060OS.           │
│        OTHERWISE, GO TO BOX 3.                                    │
└─────────────────────────────────────────────────────────────────┘
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TUQ.060OS   [Where was {CHILD} when {he/she} was not with you?]

SPECIFY OTHER PLACE.

_____
                      OTHER PLACE

CAPI INSTRUCTION: DK AND RF DISALLOWED.


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┌─────────────────────────────────────────────────────────────────┐
│                            BOX 3                                  │
│                                                                   │
│        GO TO SECTION HEQ (HOME ENVIRONMENT, ACTIVITIES, AND       │
│        COGNITIVE STIMULATION).                                    │
└─────────────────────────────────────────────────────────────────┘
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HOME ENVIRONMENT, ACTIVITIES, AND COGNITIVE STIMULATION (FALL FIRST GRADE) - HEQ

HEQ.010   Now I'd like to talk with you about {CHILD}'s activities with family members during a <u>typical</u> week of the summer. {Since {CHILD} was not with you for a lot of the summer, please just answer questions about activities that you happen to know about, or tell us if you can't answer because {he/she} was away from you for the whole summer.} How often did you or any other family member …

IF CHILD WAS AWAY FROM THE RESPONDENT THE WHOLE SUMMER, ENTER "5."

HELP TEXT:

If respondent asks what family means, say that we mean any person who lives in the child's household and any relative of the child living outside the child's household.

{[PROBE: Would you say never, once or twice, 3-6 times, or every day?]}

CAPI INSTRUCTION: DISPLAY "Since {CHILD} … to know about."   IF TUQ.040 $\geq$ 4. OTHERWISE, USE A NULL DISPLAY.

CAPI INSTRUCTION: DISPLAY "PROBE..day?" IF AT B OR C. DISPLAY "Now…member…" AND "PROBE…day?" IN SQUARE BRACKETS IF AT B OR C.

CAPI INSTRUCTION: DISPLAY "typical" IN UNDERLINED TEXT.

CAPI INSTRUCTION: IF "5" IS ENTERED FOR A, B, OR C, SKIP TO HEQ.090.

	NEVER	ONCE OR TWICE	3-6 TIMES	EVERY DAY	REFUSED	DON'T KNOW
a. Do math activities with {CHILD}, such as learning numbers, adding, subtracting, or measuring. Would you say never, once or twice, 3-6 times, or every day?	1	2	3	4	8	9
b. Do writing activities with {him/her}?	1	2	3	4	8	9
c. Read books to {him/her}?	1	2	3	4	8	9

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                      ┌──────────────────────────────────────────────────┐
                      │                    BOX 1                         │
                      │                                                  │
                      │  ■  IF HEQ.010c = 1, 8, or 9, GO TO HEQ.030.    │
                      │  ■  OTHERWISE, ASK HEQ.020.                     │
                      └──────────────────────────────────────────────────┘
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HEQ.020   Thinking about a typical week during the summer, when you or another family member read to {CHILD}, how long was {he/she} generally read to each time?   Would you say ...

15 minutes or less,... 1

16 to 29 minutes,... 2

30 to 45 minutes, or....................................... 3

46 minutes or more?...................................... 4

REFUSED 8

DON'T KNOW 9

HEQ.030   During a typical week during the summer, how often did {CHILD}…

HELP TEXT FOR ITEM B:

Electronic device: By electronic device, we mean any type of computer, cell phone, smart phone, iPod, reading device (such as Kindle or Nook), or game system (including those such as Wii, XBox, DS, iTouch, and Playstation).

{[PROBE: Would you say never, once or twice, 3-6 times, or every day?]}

CAPI INSTRUCTION: DISPLAY "During…" IN SQUARE BRACKETS WHEN ON HEQ.030b-c.

CAPI INSTRUCTION: DISPLAY "PROBE…day?" WHEN ON HEQ.030b-c.

CAPI INSTRUCTION: DISPLAY "on {his/her} own" IN UNDERLINED TEXT.

CAPI INSTRUCTION: DISPLAY "HELP AVAILABLE" WHEN ON ITEM B.

		NEVER	ONCE OR TWICE	3-6 TIMES	EVERY DAY	REFUSED	DON'T KNOW
a.	Look at or read books on {his/her} own? Would you say never, once or twice, 3-6 times, or every day?	1	2	3	4	8	9
b.	Use a computer or other electronic device for educational purposes?	1	2	3	4	7	9
c.	Play outside actively (for example, running, jumping, or swinging)?	1	2	3	4	8	9

HEQ 038   Now I'd like to ask some questions about {CHILD}'s television or video watching during the summer. We want you to include television shows, videos, or DVDs watched on a TV, computer, or handheld device like an iPad or cellphone; but <u>not</u> games played on gaming systems like Playstation, Wii, Xbox or handheld devices.

On a typical summer day, how many hours of television, videotapes, or DVDs on average did {CHILD} watch?

CAPI INSTRUCTIONS:

1.   DISPLAY THE FOLLOWING MATRIX IN THE RESPONSE FIELD:

HOURS	MINUTES

2.   WHEN CURSOR IS ON THE HOUR FIELD, DISPLAY 'ENTER NUMBER OF HOURS. IF LESS THAN AN HOUR, ENTER '0.''

3.   WHEN CURSOR IS ON THE MINUTES FIELD, DISPLAY 'ENTER NUMBER OF MINUTES.'

4.   WHEN CURSOR IS ON THE MINUTES FIELD, DISPLAY 'Now…XBox' AND 'On… watch?' IN SQUARE BRACKETS.

5.   DK AND RF ALLOWED AT ALL FIELDS. EMPTY IS ALLOWED FOR MINUTES, BUT NOT FOR HOURS.

6.   IF HOURS ARE DK, SKIP TO MINUTES. IF HOURS ARE REFUSED, SKIP TO HEQ.039.

7.   HARD RANGE = 0 – 24 FOR HOURS; 0 – 59 FOR MINUTES. THE HOURS AND MINUTES TOGETHER SHOULD NOT EXCEED 24 HOURS. OTHERWISE, DISPLAY ERROR MESSAGE: "The total number of time exceeds 24 hours! Please correct the entries."

HEQ.039   Now I'd like to ask some questions about the amount of time {CHILD} played video games over the summer. We want you to include games played on systems like Playstation, Wii, or Xbox, or on handheld devices such as a Nintendo DS, Sony PSP, iPod, iPad, or cellphone, or games played on the computer.

On a typical summer day, how much time–did {CHILD} spend playing video games? Please do not include time the child spent–on the computer doing educational activities.

CAPI INSTRUCTIONS:

1.   DISPLAY THE FOLLOWING MATRIX IN THE RESPONSE FIELD:

HOURS	MINUTES

2.   WHEN CURSOR IS ON THE HOUR FIELD, DISPLAY 'ENTER NUMBER OF HOURS. IF LESS THAN AN HOUR, ENTER '0.'

3.   WHEN CURSOR IS ON THE MINUTES FIELD, DISPLAY 'ENTER NUMBER OF MINUTES.'

4.   WHEN CURSOR IS ON THE MINUTES FIELD, DISPLAY 'Now…computer' AND 'On …activities' IN SQUARE BRACKETS.

5.   DK AND RF ALLOWED AT ALL FIELDS. EMPTY IS ALLOWED FOR MINUTES, BUT NOT FOR HOURS.

6.   IF HOURS ARE DK, SKIP TO MINUTES. IF HOURS ARE REFUSED, SKIP TO HEQ.050.

7.   HARD RANGE = 0 – 24 FOR HOURS; 0 – 59 FOR MINUTES. THE HOURS AND MINUTES TOGETHER SHOULD NOT EXCEED 24 HOURS. OTHERWISE, DISPLAY ERROR MESSAGE: "The total number of time exceeds 24 hours! Please correct the entries."

HEQ.050   About how many times during <u>the summer</u> did {CHILD} go to the library or a bookstore?

ENTER NUMBER OF TIMES.

CAPI INSTRUCTIONS: DISPLAY "the summer" IN UNDERLINED TEXT.

CAPI INSTRUCTION: HARD RANGE 0 – 97.

|___|___|

REFUSED 88

DON'T KNOW 99

BOX 2

IF HEQ.050 = 0, 88, or 99, GO TO HEQ.090.
OTHERWISE, GO TO HEQ.060.

HEQ.060   Did {he/she} participate in any story hours at the library or bookstore?

YES... 1
NO 2
REFUSED 8

DON'T KNOW 9

HEQ.090   Did {CHILD}'s school give you a book list with particular books to read over the summer?

YES...1 (HEQ.095)
NO..2 (BOX 3)
REFUSED...8 (BOX 3)
DON'T KNOW..9 (BOX 3)

HEQ.095   How many books on that list did {CHILD} read during the summer?

ENTER NUMBER OF BOOKS.

CAPI INSTRUCTIONS: RANGE CHECK 0-100

|___|___|___|

REFUSED..888
DON'T KNOW..999

BOX 3

IF ANY HEQ.010a-c = 5, GO TO HEQ.220. ELSE, GO TO HEQ.150.

HEQ.150   During the summer, did you or another family member take {CHILD} to any of the following places?

CAPI INSTRUCTIONS: DISPLAY "During…places?" IN SQUARE BRACKETS FOR B-F.

		YES	NO	REFUSED	DON'T KNOW
a.	An art gallery, museum, or historical site?	1	2	8	9
b.	Zoos or aquariums?	1	2	8	9
c.	Amusement parks?	1	2	8	9
d.	Beaches, lakes, rivers, or state or national parks?	1	2	8	9
e.	Plays or concerts?	1	2	8	9
f.	A large city (other than where {CHILD} lives)?	1	2	8	9

HELP AVAILABLE

HEQ.220   Summer school includes programs that schools suggest or require a child to attend, and also school enrichment programs that are optional. Did {CHILD} attend summer school this summer? Please don't include summer camp.

HELP TEXT:
Summer programs called "interventions" should be included in summer school.

YES... 1
NO.. 2
REFUSED 8
DON'T KNOW 9

BOX 4

■   IF HEQ.220 = 1, GO TO HEQ.230A. ELSE, GO TO HEQ.290.

HEQ.230A   How long did {CHILD} attend summer school this summer?

ENTER NUMBER OF DAYS, WEEKS, OR MONTHS.

|___|___|
ENTER NUMBER

REFUSED 8

25

DON'T KNOW... 9

HEQ.230B   [How many long did {CHILD} attend summer school this summer?]

                  ENTER UNIT
                  CAPI INSTRUCTION: RANGE CHECK: IF HEQ.230B = 1, THEN THE RANGE FOR
                  HEQ.230A = 1-123. ELSE IF HEQ.230B = 2, THEN THE RANGE FOR HEQ.230A = 1-16.
                  ELSE IF HEQ.230B = 3, THEN HEQ.230B = 4.

                                              DAYS...................................... 1

                                              WEEKS.................................... 2

                                              MONTHS................................. 3

                                              REFUSED 8
                                              DON'T KNOW.......................... 9

HEQ.250   How many days a week did {CHILD} attend summer school or the school enrichment
                  program?

                  CAPI INSTRUCTION: DISPLAY "days a week" IN UNDERLINED TEXT.

                  CAPI INSTRUCTION: SOFT RANGE 1-5; HARD RANGE 1-7.

                                  |___|___|
                                  ENTER DAYS

                                  REFUSED 88
                                  DON'T KNOW 99

HEQ.260   How many hours a day did {CHILD} attend this program?

                  CAPI INSTRUCTION: DISPLAY "hours a day" IN UNDERLINED TEXT.

                  CAPI INSTRUCTION: SOFT RANGE 1-6; HARD RANGE 1-8.

                                  |___|___|
                                  ENTER HOURS

                                  REFUSED 88
                                  DON'T KNOW 99

HEQ.270   Did this program include...

CAPI INSTRUCTIONS: DISPLAY "Did…include…" IN SQUARE BRACKETS FOR B-G.

		YES	NO	REFUSED	DON'T KNOW
a.	Reading?	1	2	8	9
b.	Math?	1	2	8	9
c.	Science?..	1	2	8	9
d.	Art?	1	2	8	9
e.	Music?	1	2	8	9
f.	Computers?	1	2	8	9

BOX 5

FOR CONTINUING CASES THAT HAD A FALL KINDERGARTEN INTERVIEW, IF [PLQ.020=1 FROM FALL K (OTHER LANGUAGE REGULARLY SPOKEN AT HOME BESIDES ENGLISH) AND ((PLQ.060 WAS ASKED IN FALL K AND PLQ.060 NE 0 FROM FALL K (ENGLISH NOT SPOKEN AS PRIMARY LANGUAGE) OR (PLQ.060 WAS NOT ASKED IN FALL K AND PLQ.041 NE 0 FOR RESPONDENT FROM FALL K (ENGLISH NOT SPOKEN AS PRIMARY LANGUAGE-NOTE: THIS STATEMENT INCLUDES CASES FOR WHICH PLQ.041 WAS ALSO NOT ASKED))] OR

FOR FALL KINDERGARTEN NONRESPONSE CASES THAT HAD A SPRING KINDERGARTEN INTERVIEW, IF [SPQ.155=1 FROM SPRING K (OTHER LANGUAGE REGULARLY SPOKEN AT HOME BESIDES ENGLISH) AND SPQ.157 NE 0 (ENGLISH NOT SPOKEN AS PRIMARY LANGUAGE)], GO TO HEQ.270g. ELSE, GO TO HEQ.280.

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g.	English language instruction?	1	2	8	9

HEQ.280   Was the summer school a program …

Required by the school, ...	1
Suggested by the school, or	2
A program you decided to send {him/her} to?	3
REFUSED..	8
DON'T KNOW..	9

HEQ.290   During this past summer, did {CHILD} receive any type of services for children with special needs, such as speech or occupational therapy, or did {he/she} participate in a summer special education program?

YES...	1	
NO...	2	(HEQ.300)
REFUSED..	8	(HEQ.300)
DON'T KNOW...	9	(HEQ.300)

<u>YES</u>   <u>NO</u>   <u>RF</u>
<u>DK</u>

a.   Speech or language therapy?...   1   2   8   9

HELP TEXT:
Speech or language therapy: Therapy involving the evaluation or treatment of the student's speech or language abilities. Impairments to speech can include one or more of the following: articulation errors (includes omitting words, substituting words, or distorting sounds), inappropriate voice (including pitch, loudness, or voice quality), or abnormal fluency (including abnormal rate of speaking, speech interruptions, repetitions of sounds, words, phrases or sentences). Impairments to language can include improper use of phonemes, syntax, or semantics. Language impairments can also stem from improper practical use of language. Therapy includes special techniques to overcome speech or language limitations. Therapy should be provided only by a teacher of the speech or language impaired who is certified by the state, or by a certified Speech and Language Therapist/Pathologist.

b.   Occupational therapy?..   1   2   8   9

HELP TEXT:
Occupational therapy: Therapy involving the evaluation or treatment of the student's level of independence in daily living activities. The goal of occupational therapy is to promote maximum independence in daily living. Therapy can include the use of work, play, or self-care activities to improve functional ability, promote health, prevent injury or further disability. Therapy should be provided only by a therapist who has been certified by the American Occupational Therapy Association or by an occupational therapy assistant who provides therapy under the supervision of a certified occupational therapist.

c.   Physical therapy?...   1   2   8   9

HELP TEXT:
Physical therapy: Therapy involving the evaluation or treatment of health problems resulting from injury or disease. It is also sometimes called physiotherapy. Physical therapists assess joint motion, muscle strength and endurance, how well the heart and lungs work, and how well children can do activities required for daily living. Treatment includes therapeutic exercise, cardiovascular endurance training, and training in activities of daily living, as well as the use of massage, light, cold, heat, electricity, and mechanical devices to treat physical disorders. Physical therapy does not include the use of X-Ray

technology. Therapy should be provided only by a therapist who has been state-certified to provide such services.

d. Psychological services?.. 1   2   8
9

HELP TEXT:

Psychological services: Services that involve the assessment of academic skills and learning aptitudes, personality and emotional development, social skills and school climates, and eligibility for special education. Treatment involves one-on-one interaction with students or parents to resolve personal conflicts and problems in learning and adjustment, psychological counseling for students and parents, social skills training, and assistance through separation and loss. Within school systems, psychological services are typically provided by certified school psychologists. However, assessment and treatment can be extended to the health community and include services provided by clinical psychologists, psychiatric social workers, or psychiatrists (who are medical doctors).

e. Any other kind of therapy?... 1   2   8
9

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                      BOX 6
■   IF HEQ.298e IS CODED '1' (YES), CONTINUE WITH
    HEQ.298OS.
■   OTHERWISE, GO TO HEQ.300.
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HEQ.298OS   [Did {CHILD} receive any other kind of therapy?]
               SPECIFY SERVICE.

               _____
                              SERVICE

               CAPI INSTRUCTION: DK AND RF DISALLOWED.

HEQ.300   Did {CHILD} attend any day or overnight camps over the summer?

                              YES.. 1
                              NO... 2   (HEQ.430)
                              REFUSED 8   (HEQ.430)
                              DON'T KNOW 9   (HEQ.430)

HEQ.305   How many camps did {CHILD} go to?

                 ENTER NUMBER OF CAMPS.

                 PROBE: Different sessions of camp should be counted as different "camps," even if they
                 are held at the same location.

                 CAPI INSTRUCTION: HARD RANGE 1-16.

                                          |___|___|

                                 REFUSED 88
                                 DON'T KNOW 99

HEQ.330   {Please answer for the camp where {CHILD} spent the most time during the summer.}
                 How many days a week did {CHILD} attend the camp?

                 ENTER NUMBER OF DAYS.

                 CAPI INSTRUCTION: DISPLAY FIRST SENTENCE IF CHILD ATTENDED MORE THAN
                 ONE CAMP (HEQ.305 ≥ 2, DK, OR RF). OTHERWISE, DO NOT USE THIS DISPLAY.

                 CAPI INSTRUCTION: DISPLAY "days a week" IN UNDERLINED TEXT.

                 CAPI INSTRUCTION: HARD RANGE 1-7.

                                          |___|

                                 REFUSED 88
                                 DON'T KNOW 99

HEQ.340 How many <u>hours a day</u> did {CHILD} attend the camp?

ENTER NUMBER OF HOURS.

ENTER 24 HOURS IF CHILD WAS IN OVERNIGHT CAMP.

CAPI INSTRUCTION: DISPLAY "hours a day" IN UNDERLINED TEXT.

CAPI INSTRUCTION: HARD RANGE CHECK 1-24.

|___|___|

REFUSED 88
DON'T KNOW 99

HEQ.350 About how many <u>weeks</u> did {CHILD} attend the camp?

ENTER NUMBER OF WEEKS.

CAPI INSTRUCTION: DISPLAY "weeks" IN UNDERLINED TEXT.

CAPI INSTRUCTION: HARD RANGE CHECK 1 – 16 WEEKS.

|___|___|

REFUSED 88
DON'T KNOW 99

HEQ.360 {Now, I'd like to ask you about all the camps that {CHILD} went to during the summer.} {Now, I'd like to ask you about both camps that {CHILD} went to during the summer.} Did the camp{s} include...

CAPI INSTRUCTIONS: IF HEQ.305 GE 3, DISPLAY "Now, I'd like to ask you about all the camps that {CHILD} went to during the summer." AND DISPLAY THE "s" AFTER THE WORD "camps". ELSE, IF HEQ.305 = 2, DISPLAY "Now, I'd like to ask you about both camps that {CHILD} went to during the summer." AND DISPLAY THE "s" AFTER THE WORD "camps". ELSE, USE A NULL DISPLAY FOR ALL DISPLAYS.

CAPI INSTRUCTIONS: DISPLAY "{Now…include…" IN SQUARE BRACKETS FOR B-E.

		YES	NO	DON'T KNOW REFUSED	
a.	Sports?	1	2	8	9
b.	Arts and crafts?	1	2	8	9
c.	Computers?	1	2	8	9
d.	Academic activities?	1	2	8	9
e.	Music, performing arts or drama?	1	2	8	9

HEQ.393 Did {CHILD}'s participation in {this camp/any of these camps/either of these camps} help to cover the hours when you needed adult supervision for {him/her}?
CAPI INSTRUCTIONS: IF HEQ.305 GE 3, DISPLAY "any of these camps ". ELSE, IF HEQ.305 = 2, DISPLAY "either of these camps". ELSE, DISPLAY "this camp".

YES.. 1
NO... 2
REFUSED.. 8
DON'T KNOW………………………………… 9

HEQ.430   Was {CHILD} tutored over the summer on a regular basis, by someone other than you or a family member, in a specific subject, such as reading, math, science, or a foreign language?

HELP TEXT:

Tutored: This means being taught individually or in a small group setting. DO NOT include therapy as tutoring.

Regular Basis: A program occurring on a routine schedule (i.e., occurring at least weekly or on some other schedule).

Not a family member: A person who is not related to the focal child and is not living in the same household with the focal child.

YES...	1
NO..	2
REFUSED	8
DON'T KNOW	9

BOX 7

■   IF HEQ.430 = 1, CONTINUE WITH HEQ.440. OTHERWISE, GO TO BOX 9.

HEQ.440   What was {CHILD} tutored in?

CODE ALL THAT APPLY.

CODE ENGLISH LANGUAGE TUTORING PROGRAMS AS "4".
CODE TUTORING IN LANGUAGES OTHER THAN ENGLISH AS "5".

PROBE: Anything else?

READING..	1
MATH..	2
SCIENCE..	3
ENGLISH LANGUAGE SKILLS.....................	4
FOREIGN LANGUAGE..................................	5
OTHER (SPECIFY) _____	
_____	91
REFUSED	8
DON'T KNOW	9

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┌─────────────────────────────────────────────────────────────┐
│                          BOX 8                               │
│                                                              │
│   ■   IF HEQ.440 IS CODED 91, CONTINUE WITH HEQ.440OS.       │
│   ■   OTHERWISE, GO TO HEQ.450.                              │
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HEQ.440OS   [What was {CHILD} tutored in?]
SPECIFY SUBJECT.

_____
SUBJECT

CAPI INSTRUCTION: DK AND RF DISALLOWED.

HEQ.450   How many <u>days a week</u> was {CHILD} tutored?

ENTER NUMBER OF DAYS.

CAPI INSTRUCTION: DISPLAY "days a week" IN UNDERLINED TEXT.

CAPI INSTRUCTION: SORT RANGE CHECK 1-5; HARD RANGE CHECK 1-7.

|___|

REFUSED 88
DON'T KNOW 99

HEQ.460   How many <u>hours a day</u> was {CHILD} tutored?

ENTER NUMBER OF HOURS.

CAPI INSTRUCTION: DISPLAY "hours a day" IN UNDERLINED TEXT.

CAPI INSTRUCTION: SOFT RANGE 1-6. HARD RANGE CHECK 1-8.

|___|___|

REFUSED 88
DON'T KNOW 99

HEQ.470   About how many <u>weeks</u> was {CHILD} tutored?

                 ENTER NUMBER OF WEEKS.

                 IF LESS THAN A WEEK, ENTER '1.'

                 CAPI INSTRUCTION: DISPLAY "weeks" IN UNDERLINED TEXT.
                 CAPI INSTRUCTION: HARD RANGE CHECK 1 – 16 WEEKS.

                               |___|___|

                          REFUSED 88
                          DON'T KNOW 99


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┌─────────────────────────────────────────────────────────────┐
│                          BOX 9                                │
│                                                               │
│  ■    GO TO CCQ (CHILD CARE).                                 │
└─────────────────────────────────────────────────────────────┘
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HELP AVAILABLE

CCQ.011   Did {CHILD} receive child care <u>during the summer</u> on a <u>regular basis</u> from someone other than you or another parent or guardian? This does not include occasional baby-sitting or backup care providers. Please do not include summer camps that you may have told me about earlier.

IF NEEDED, SAY: This may include grandparents, brothers and sisters, or any relatives other than you or another parent or guardian. It also may include home child care providers, regular sitters or neighbors, in addition to day care centers or extended day programs.

HELP TEXT:

Care from a relative: Record care or programs provided by someone other than the child's parents in a private home. The private home may be the child's home, the caregiver's home, or another home. In all cases, do not include care provided by a parent, even if they do not live in the household. (Do not include visitation with a separated or divorced parent who does not have custody.)

If there is at least one parent in the household, any relative living in the household is eligible to be counted as a care arrangement, if the care is provided on a regularly scheduled basis. Relatives outside the household may also be regular care providers.

If neither parent lives in the household, do not include care provided by guardians who live with the child (they are similar to parents).

Relative care arrangements may or may not have a charge or fee.

Care from a non-relative: Non-relative care is provided by someone not related to the child and is located in a private home. The private home may be the child's home, the caregiver's home, or another home.

If there is at least one parent in the household, any nonrelative living in the household is eligible to be counted as a care arrangement, IF the care is given on a regularly scheduled basis.

If neither parent lives in the household, do not include care provided by guardians who live with the child (they are treated the same as parents).

Non-relative care arrangements or programs may or may not have a charge or fee.

Day Care Center: Includes any type of formal program that provides care and supervision. It may be in a child's school or in another location, such as a church or a free-standing building. Head Start programs, nursery schools, preschools, and prekindergarten programs that include children who are in kindergarten or about to enter the first grade (some of which may be sponsored by the state) are also included.

Extended Day Program: Center-based program that provides care after or before day time hours.

Regular Basis: An arrangement or program occurring on a routine schedule (i.e., occurring at least weekly or on some other schedule). Do not include occasional babysitting or "back up" arrangements that are just used once in a while. Also, do not include going away to stay with a relative for a period of time during the summer. We are asking about child care given on a routine schedule.

CAPI INSTRUCTION: DISPLAY "during the summer" AND "regular basis" IN UNDERLINED TEXT.

```
YES................................................................   1
NO..................................................................   2  (BOX 1)
REFUSED......................................................   8  (BOX 1
DON'T KNOW................................................   9  (BOX 1)
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HELP AVAILABLE

CCQ.012   Let's talk about the child care that {CHILD} spent the most time in on a <u>regular basis</u> during the summer. Did {CHILD} spend the most time receiving child care from a relative, from a non-relative in a private home, or in a day care center or extended day program?

IF HOURS OF CARE ARE EQUAL BETWEEN TYPES OF CARE, USE CODES "4", "5", "6," OR "7".

HELP TEXT:

Care from a relative: Record care or programs provided by someone other than the child's parents in a private home. The private home may be the child's home, the caregiver's home, or another home. In all cases, do not include care provided by a parent, even if they do not live in the household. (Do not include visitation with a separated or divorced parent who does not have custody.)

If there is at least one parent in the household, any relative living in the household is eligible to be counted as a care arrangement, if the care is provided on a regularly scheduled basis. Relatives outside the household may also be regular care providers.

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If neither parent lives in the household, do not include care provided by guardians who live with the child (they are treated the same as parents).

Non-relative care arrangements or programs may or may not have a charge or fee.

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Extended Day Program: Center-based program that provides care after or before day time hours.

Regular Basis: An arrangement or program occurring on a routine schedule (i.e., occurring at least weekly or on some other schedule). Do not include occasional babysitting or "back up" arrangements that are just used once in a while. Also, do not include going away to stay with a relative for a period of time during the summer. We are asking about child care given on a routine schedule.

CAPI INSTRUCTION: DISPLAY "regular basis" IN UNDERLINED TEXT.

RELATIVE...1
NON-RELATIVE..2
DAY CARE CENTER OR EXTENDED
DAY PROGRAM...3
RELATIVE AND NON-RELATIVE CARE HAD
EQUAL HOURS...4
RELATIVE CARE AND DAY CARE
CENTER/EXTENDED DAY PROGRAM
HAD EQUAL HOURS...5
NON-RELATIVE CARE AND DAY CARE
CENTER/EXTENDED DAY PROGRAM
HAD EQUAL HOURS...6
ALL THREE TYPES OF CARE HAD EQUAL HOURS 7

REFUSED...8 (BOX 1)

DON'T KNOW..9 (BOX 1)

HELP AVAILABLE

CCQ.013   How many <u>hours</u> each <u>week</u> did {CHILD} {receive care from {his/her} relative/receive care from {his/her} non-relative/go to the day care center or extended day program}?

ENTER "77" IF CHILD DOES NOT GO TO CHILD CARE AT LEAST ONCE EACH WEEK.

RECORD THE HOURS EACH WEEK IN WHOLE HOURS.

HELP TEXT:

Record the hours each week in whole hours.

If the respondent reports daily hours, probe for weekly hours.

If the hours per week varied, ask for the number of hours in a typical week.

Include only the number of hours that the child received care when the parent was not at home.

CAPI INSTRUCTION: SOFT RANGE CHECK 1-50. HARD RANGE CHECK 1-70, 77.

CAPI INSTRUCTION: IF "77" IS ENTERED, GO TO BOX 1.

CAPI INSTRUCTION: DISPLAY receive care from {{his/her} relative" IF CCQ.012 = 1 OR 4. DISPLAY "receive care from {his/her} non-relative" IF CCQ.012 = 2. DISPLAY "go to the day care center or extended day program" IF CCQ.012 = 3, 5, 6, OR 7.

CAPI INSTRUCTION: DISPLAY "hours" AND "week" IN UNDERLINED TEXT.

|___|___|

REFUSED.. 88

DON'T KNOW... 99

CCQ.014   How many <u>weeks</u> during the summer did {CHILD} receive care from {his/her} relative/{his/her} non-relative/the day care center or extended day program/both {his/her} relative and non-relative combined/both {his/her) relative and the day care center or extended day program combined/both {his/her} non-relative and the day care center or extended day program combined/{his/her} relative, non-relative, and the day care center or extended day program combined}?

CAPI INSTRUCTION: DISPLAY "weeks" IN UNDERLINED TEXT.
CAPI INSTRUCTION: HARD RANGE CHECK 1 - 16.
CAPI INSTRUCTION: DISPLAY receive care from {{his/her} relative" IF CCQ.012 = 1. DISPLAY "receive care from {his/her} non-relative" IF CCQ.012 = 2. DISPLAY "go to the day care center or extended day program" IF CCQ.012 = 3. DISPLAY "both {his/her} relative and non-relative combined" IF CCQ.012 = 4. DISPLAY "both {his/her) relative and the day care center or extended day program combined" IF CCQ.012 = 5. DISPLAY "both {his/her} non-relative and the day care center or extended day program combined" IF CCQ.012 = 6.   DISPLAY "{his/her} relative, non-relative, and the day care center or extended day program combined" IF CCQ.012 = 7.

|___|___|
ENTER # OF WEEKS

REFUSED.. 88
DON'T KNOW... 99

BOX 1
■ GO TO SECTION CMQ (CLOSING).

CLOSING – CMQ

CMQ.680   WAS THIS INTERVIEW CONDUCTED BY TELEPHONE OR IN-PERSON?

TELEPHONE…………………1

IN-PERSON……………………2

CMQ.690   WAS THIS INTERVIEW CONDUCTED IN ENGLISH, SPANISH, OR ANOTHER LANGUAGE?

ENGLISH... 1 (BOX 1)

SPANISH... 2 (BOX 1))

ANOTHER LANGUAGE.. 91 (CMQ.690OS)

CMQ.690OS SPECIFY OTHER LANGUAGE.

[WAS THIS INTERVIEW CONDUCTED IN ENGLISH, SPANISH, OR ANOTHER LANGUAGE?]

BOX 1

IF CMQ.680 = 2, GO TO CMQ.695. ELSE, GO TO BOX 2.

CMQ.695   WHERE WAS THIS INTERVIEW CONDUCTED?

CHILD'S HOME.. 1

CHILD'S SCHOOL... 2

SOMEWHERE ELSE... 3

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┌─────────────────────────────────────────────────────────────────────────────┐
│                                   BOX 2                                      │
│                                                                             │
│ SET FINAL DISPOSITION CODE:                                                 │
│                                                                             │
│ IF CMQ.680=1 (TELEPHONE) AND CMQ.690=1 (ENGLISH), SET DISPOSITION CODE TO 60.│
│                                                                             │
│ IF CMQ.680=1 (TELEPHONE) AND CMQ.690=2 (SPANISH), SET DISPOSITION CODE TO 61.│
│                                                                             │
│ IF CMQ.680=1 (TELEPHONE) AND CMQ.690=3 (ANOTHER LANGUAGE), SET DISPOSITION  │
│ CODE TO 62.                                                                 │
│                                                                             │
│ IF CMQ.680=2 (IN-PERSON) AND CMQ.690=1 (ENGLISH), SET DISPOSITION CODE TO 63.│
│                                                                             │
│ IF CMQ.680=2 (IN-PERSON) AND CMQ.690=2 (SPANISH), SET DISPOSITION CODE TO 64.│
│                                                                             │
│ IF CMQ.680=2 (IN-PERSON) AND CMQ.690=3 (ANOTHER LANGUAGE), SET DISPOSITION  │
│ CODE TO 65.                                                                 │
└─────────────────────────────────────────────────────────────────────────────┘
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CMQ.700

Thank you very much for your cooperation and for taking the time to participate in the Early Childhood Longitudinal Study.

PRESS ENTER TO CONTINUE.

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┌─────────────────────────────────────────────────────────────────────────────┐
│                                   BOX 3                                      │
│                                                                             │
│ GO TO CMQ.720.                                                              │
└─────────────────────────────────────────────────────────────────────────────┘
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CMQ.701   We would like to call the parent or guardian for {CHILD} at the household where {he/she} lives. Could you please give me the name and telephone number for the home that I should call? AFTER EXITING ON THE NEXT SCREEN, ENTER CONTACT INFORMATION FOR CHILD'S RESIDENCE INTO THE ELECTRONIC RECORD OF CALLS.

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┌─────────────────────────────────────────────────────────────────────────────┐
│                                   BOX 4                                      │
│                                                                             │
│ GO TO CMQ.720.                                                              │
└─────────────────────────────────────────────────────────────────────────────┘
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CMQ.702   We would like to call back when {CHILD}'s parent or guardian is available. Please tell me when we should call back. AFTER EXITING ON THE NEXT SCREEN, ENTER CALL BACK TIME INTO THE ELECTRONIC RECORD OF CALLS.

BOX 5
GO TO CMQ.720.

CMQ.703   Thank you. AFTER EXITING ON THE NEXT SCREEN, ENTER INTO THE ELECTRONIC RECORD OF CALLS WHETHER YOU SPOKE TO THE CONTACT PERSON AND ANY INFORMATION YOU HAVE ABOUT WHY AN APPROPRIATE RESPONDENT WAS NOT AVAILABLE, NOT IN THE HOUSEHOLD, OR THE INFORMATION WAS REFUSED/DON'T KNOW.

CMQ.720   PRESS 1 AND ENTER TO SAVE AND EXIT THIS CASE.