

# TITLE I EARLY CHILDHOOD LANGUAGE DEVELOPMENT STUDY

## *Teacher Student Report*

*April 28, 2011*



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Conducted by: Mathematica Policy Research  
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**A1. Are you currently the Reading/Language Arts teacher for this student?**

Yes → **GO TO A6**

No

**A2. What is the main reason you are no longer this student's Reading/Language Arts teacher?**

Student moved to another class in the same school

Student moved to another school → **GO TO A4**

Student was never in my class/I don't know this student → **GO TO A5**

**A3. What is the name of the teacher whose Reading/Language Arts class this student currently attends?**

Name: \_\_\_\_\_

**A4. Please record the last date this student was in your Reading/Language Arts class.**

|\_|\_| / |\_|\_| / |\_|\_|\_|\_|  
Month Day Year

**A5. Thank you.**

**A6. During this school year (2011-2012), how many days has this student been...**

(Drop Down Menu Range 0-20 and then more than 20)

**NUMBER OF  
DAYS**

a. Absent from class?.....

|\_|\_|

b. Sent to the office or removed from your class due to behavior problems?....

|\_|\_|

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**C1. Was this student retained in a grade at the end of the last school year (2010-2011)?**

1  Yes

0  No

**C2. During this school year (2011-2012), has this student received instruction and/or related services in any of the following types of programs in your school during the school day?**

MARK (X) ONE PER ROW

	YES	NO	SERVICE NOT PROVIDED
a. Individual tutoring in reading.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	2 <input type="checkbox"/>
b. Pull-out small group reading instruction.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	2 <input type="checkbox"/>
c. English as a Second Language (ESL) program (designed to teach English to those whose home language is not English).....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	2 <input type="checkbox"/>
d. Learning a language other than English.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	2 <input type="checkbox"/>
e. Gifted and talented program.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	2 <input type="checkbox"/>
f. Special education, speech, or related services.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	2 <input type="checkbox"/>
g. Individual or group counseling.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	2 <input type="checkbox"/>

**C3. During this school year (2011-2012), has this student received any of the following Supplemental Educational Services before school or after school to help with reading/language arts?**

MARK (X) ONE PER ROW

	YES	NO	SERVICE NOT PROVIDED BEFORE OR AFTER SCHOOL
a. Individual tutoring in reading/language arts.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	2 <input type="checkbox"/>
b. Small group reading/language arts instruction.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	2 <input type="checkbox"/>
c. English as a Second Language (ESL) program (designed to teach English to those whose home language is not English).....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	2 <input type="checkbox"/>
d. Help with homework.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	2 <input type="checkbox"/>
e. Help with test-taking skills.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	2 <input type="checkbox"/>

**D1. Thinking specifically about this student's family, how often did the following happen during this school year (2011-2012)?**

**MARK (X) ONE PER ROW**

	<b>NEVER</b>	<b>1-2 TIMES</b>	<b>3 OR MORE TIMES</b>
a. Information was sent home to this student's family about what the student is learning at school (separate from report card).....	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>
b. You suggested ways parent could help this student do well at school.....	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>
c. This student's parent asked how (he/she) could help the student with schoolwork.....	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>
d. You invited this student's parent to school...	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>
e. You called this student's parent or sent a note to let (he/she) know that the student did well at something.....	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>
f. You called this student's parent or sent a note to let (he/she) know that the student was having problems.....	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>
g. This student's parent volunteered to help in the classroom.....	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>
h. This student's parent came to parent-teacher conferences.....	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>
i. This student's parent visited the classroom..	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>
j. This student's parent called or came to see you.....	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>