**Appendix C3 TIMSS 2015 Main Study Added Survey Items**

During the August 2014 international meeting of TIMSS National Research Coordinators, representatives from the participating countries agreed that additional questions would be added to the TIMSS student, teacher, and school background questionnaires. The general contents of these additional questions are summarized below, and the final wording will be released by the TIMSS International Study Center in September 2014 for incorporation into all main study TIMSS 2015 background questionnaires.

**Student Questionnaire – grades 4 and 8**

**About how often are you absent from school?** *Fill* ***one*** *circle only.*

* Once a week
* Once every two weeks
* Once a month
* Never or almost never

**How often do you eat breakfast on school days?** *Fill* ***one*** *circle only*

* Every day
* Most days
* Sometimes
* Never or almost never

**Teacher Questionnaire – grade 4 and 8**

**Indicate the extent to which you agree or disagree with each of the following statements.** *Check* ***one*** *circle for each line.* **Agree a lot/Agree a little/Disagree a little/ Disagree a lot**

* There are too many students in the classes
* I have too much material to cover in class
* I have too many teaching hours
* I need more time to prepare for class
* I need more time to assist individual students
* I feel too much pressure from parents
* I have difficulty keeping up with all of the changes to the curriculum
* I have too many administrative tasks

**School Questionnaire – grades 4 and 8**

**Does your school provide free breakfast for students?** *Check* ***one*** *circle only.*

* Yes, for all students
* Yes, for some students
* No, free breakfast is not provided

**Does your school provide free lunch for students?** *Check* ***one*** *circle only.*

* Yes, for all students
* Yes, for some students
* No, free lunch is not provided

**A. Does your school provide a place where students can work on their schoolwork before or after school?** *Check* ***one*** *circle only.* Yes/ No

If Yes,

**B. Is someone available to assist them with their schoolwork?** *Check* ***one*** *circle only.*

**School Questionnaire – grade 4 only**

**To what degree are the following health topics emphasized in your school?**

*Check* ***one*** *circle for each line.* **Very high/ High/ Medium/Low**

* Washing hands
* Brushing teeth
* A healthy diet/nutrition
* Disease prevention

*Asked of school principal:*

**What is the highest level of formal education you** **have completed?** *Check* ***one*** *circle only.*

* Did not complete <Bachelor's or equivalent level—ISCED Level 6>
* <Bachelor's or equivalent level—ISCED Level 6>
* <Master's or equivalent level—ISCED Level 7>
* <Doctor or equivalent level—ISCED Level 8>

**Do you hold the following degrees in educational** **leadership?** *Check* ***one*** *circle for each line.*

**Yes/No**

* <Master's or equivalent level—ISCED Level 7>
* <Doctor or equivalent level—ISCED Level 8>