

**PROGRESS IN INTERNATIONAL READING LITERACY  
STUDY (PIRLS 2021) MAIN STUDY RECRUITMENT AND  
FIELD TEST**

**OMB# 1850-0645 v.14**  
(Carried over from v. 13)

**APPENDIX C2**

**PIRLS 2021 Field Test Questionnaires (U.S.-adapted Versions)**

**National Center for Education Statistics (NCES)  
U.S. Department of Education  
Institute of Education Sciences (IES)  
Washington, DC**

**March 2020**  
(No change since October 2019)

## **APPENDIX C2: PIRLS 2021 FIELD TEST QUESTIONNAIRES (US Versions)**

### **APPENDIX C2 TABLE OF CONTENTS**

A. School Questionnaire for the 2021 Field Test (US).....	C03
B. Teacher Questionnaire for the 2021 Field Test (US).....	C22
C. Student Questionnaire for the 2021 Field Test (US).....	C55

The International Association for the Evaluation of Education Achievement (IEA) has released the final international versions of the PIRLS 2021 field test questionnaires and, at the time of this submission, is in the process of reviewing and approving the adaptations to be made by individual countries, including to the U.S. versions of the field test questionnaires. This Appendix C2 provides the draft U.S. versions of the PIRLS 2021 field test questionnaires to be administered in spring 2020 (consisting of the final international versions with the U.S. adaptations proposed by NCES to IEA for IEA’s review and approval). The U.S. expects these draft versions to be approved by the IEA and considered final; however, if the final, U.S. adapted versions of the PIRLS 2021 field test questionnaires will differ from those provided in this appendix, the final versions will be submitted to OMB for approval, in revised Appendices C1 and C2, as a change request in December 2019.

Appendix C1 lists the changes that were made to the PIRLS 2021 field test questionnaire from the last round of PIRLS (PIRLS 2016 main study) in the U.S.-adapted versions.



Identification Label

PROGRESS IN INTERNATIONAL READING LITERACY STUDY

# School Questionnaire

## Grade 4

**National Center for Education Statistics  
Institute of Education Sciences  
550 12th Street, SW  
Washington, DC 20202, USA**

## Field Test Version

*The National Center for Education Statistics (NCES) is authorized to conduct this study under the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543), and to collect students' education records from educational agencies or institutions for the purpose of evaluating federally supported education programs under the Family Educational Rights and Privacy Act (FERPA, 34 CFR §§ 99.31(a)(3)(iii) and 99.35). All of the information you provide 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 (20 U.S.C. §9573 and 6 U.S.C. §151).*

*According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this voluntary information collection is 1850-0645. The time required to complete this information collection is estimated to average 40 minutes per principal, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the survey. If you have any comments or concerns regarding the accuracy of the time estimate(s), suggestions for improving the form, or questions about the status of your individual submission of this form, write directly to: Progress in International Reading Literacy Study (PIRLS), National Center for Education Statistics, Potomac Center Plaza, 550 12th Street, SW, 4th floor, Washington, DC 20202.*

OMB No. 1850-0645, Approval Expires 04/30/2022.



Your school has agreed to participate in PIRLS (Progress in International Reading Literacy Study) 2021, an educational research project sponsored by the International Association for the Evaluation of Educational Achievement (IEA). PIRLS measures trends in student achievement in reading and studies differences in national education systems in almost 60 countries in order to help improve teaching and learning worldwide.

This questionnaire is addressed to school principals and department heads who are asked to supply information about their schools. Since your school has been selected as part of a nationwide sample, your responses are very important in helping to describe primary/elementary education in the United States. It is important that you answer each question carefully so that the information provided reflects the situation in your school as accurately as possible. Some of the questions will require that you look up school records, so you may wish to arrange for the assistance of another staff member to help provide this information.

Since PIRLS is an international study and all countries are using the same questionnaire, you may find that some of the questions seem unusual or are not entirely relevant to you or schools in the United States. Nevertheless, it is important that you do your best to answer all of the questions so comparisons can be made across countries in the study.

NCES is authorized to collect information from this questionnaire under the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543), and to collect students' education records from educational agencies or institutions for the purpose of evaluating federally supported education programs under the Family Educational Rights and Privacy Act (FERPA, 34 CFR §§ 99.31(a)(3)(iii) and 99.35). You do not have to provide the information requested. However, the information you provide will help the U.S. Department of Education's ongoing efforts to understand better how the educational system in the United States compares to that in other countries. There are no penalties should you choose not to participate in this study. All of the information you provide 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 (20 U.S.C. §9573 and 6 U.S.C. §151). 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 40 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 burden to: Progress in International Reading Literacy Study (PIRLS), National Center for Education Statistics, Potomac Center Plaza (PCP), 550 12th St., SW, 4th floor, Washington, DC 20202. Thank you.

# School Enrollment and Characteristics

1

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What is the total enrollment of students in your school as of March 1, 2020?

\_\_\_\_\_ students  
*Type in the number.*

2

---

What is the enrollment of fourth-grade students in your school as of March 1, 2020?

\_\_\_\_\_ students  
*Type in the number.*

3

---

Approximately what percentage of students in your school have the following backgrounds?

*Click **one** circle for each row.*

**0 to 10%**

**11 to 25%**

**26 to 50%**

**More than 50%**

a) Come from economically disadvantaged homes    A \_\_\_ A \_\_\_ A \_\_\_ A

b) Come from economically affluent homes        A \_\_\_ A \_\_\_ A \_\_\_ A

**A. Approximately what percentage of students in your school have English as their native language?***Click **one** circle only.*

- |               |   |
|---------------|---|
| More than 90% | A |
| 76 to 90%     | A |
| 51 to 75%     | A |
| 26 to 50%     | A |
| 25% or less   | A |

**B. Of the students currently enrolled in your school, what percentage have been identified as limited-English proficient (LEP)/English Language Learners (ELL)?***Click **one** circle only.*

- |           |   |
|-----------|---|
| 0%        | A |
| 1 to 5%   | A |
| 6 to 10%  | A |
| 11 to 25% | A |
| 26 to 50% | A |
| 51 to 75% | A |
| 76 to 90% | A |
| Over 90%  | A |

**A. How many people live in the city, town, or area where your school is located?***Click one circle only.*

- |                           |   |
|---------------------------|---|
| More than 500,000 people  | A |
| 100,001 to 500,000 people | A |
| 50,001 to 100,000 people  | A |
| 30,001 to 50,000 people   | A |
| 15,001 to 30,000 people   | A |
| 3,001 to 15,000 people    | A |
| 3,000 people or fewer     | A |

**B. Which best describes the immediate area in which your school is located?***Click one circle only.*

- |   |   |
|---|---|
| Urban—Densely populated                       | A |
| Suburban—On fringe or outskirts of urban area | A |
| Medium size city or large town                | A |
| Small town or village                         | A |
| Remote rural                                  | A |

**C. Which best characterizes the average income level of the population in the school's immediate area?***Click one circle only.*

- |        |   |
|--------|---|
| High   | A |
| Medium | A |
| Low    | A |

**What type of school is this?***Click **one** circle only.*

- |  |   |
|--|---|
| Regular public school  | A |
| A regular public school with a magnet program  | A |
| A magnet school or school with a special program emphasis (e.g., Montessori, science/math school, performing arts school, talented/gifted school, foreign language immersion school, etc.) | A |
| Special education: a school that primarily serves students with disabilities   | A |
| Alternative: a school designed to address the needs of students, typically at risk of educational failure, which cannot be met in regular schools  | A |
| Vocational   | A |
| Charter School   | A |
| Private (independent)  | A |
| Private (religiously affiliated)   | A |
| Other  | A |

**Around the first of October 2019, what percentage of students at this school were eligible to receive free or reduced-price lunches through the National School Lunch Program?**

\_\_\_\_\_percentage of students  
*Type in the number.*



## Instructional Time

8

---

For the fourth-grade students in your school:

A. How many days per year is your school open for instruction?

\_\_\_\_\_ days  
*Type in the number.*

B. What is the total instructional time, excluding breaks, in a typical day?

\_\_\_\_\_ minutes  
*Type in the number of minutes per day.  
Please convert the number of hours into minutes.*

C. In one calendar week, how many days is the school open for instruction?

*Click **one** circle only.*

- |            |                       |
|------------|-----------------------|
| 6 days     | <input type="radio"/> |
| 5 1/2 days | <input type="radio"/> |
| 5 days     | <input type="radio"/> |
| 4 1/2 days | <input type="radio"/> |
| 4 days     | <input type="radio"/> |
| Other      | <input type="radio"/> |

## Resources and Technology

9

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**A. Does your school have a school library?**

*Click one circle only.*

Yes

No

**(If No, go to question #10)**

If Yes,

**B. Approximately how many books (print) with different titles does your school library have (exclude magazines and periodicals)?**

*Click one circle only.*

2,000 books or fewer

More than 2,000 books

**C. Can students borrow print or digital materials from the library to take home?**

*Click one circle only.*

Yes

No

10

---

**Does your school provide students access to digital learning resources (e.g., books, videos)?**

*Click one circle only.*

Yes

No

---

**How many computers (including tablets) does your school have for use by fourth-grade students?**

\_\_\_\_\_computers  
*Type in the number.*

**How much is your school's capacity to provide instruction affected by a shortage or inadequacy of the following?**

*Click **one** circle for each row.*

**Not at all**

**A little**

**Some**

**A lot**

**A. General School Resources**

- a) Instructional materials (e.g., textbooks) A—A—A—A
- b) Supplies (e.g., papers, pencils, materials) A—A—A—A
- c) School buildings and grounds A—A—A—A
- d) Heating/cooling and lighting systems A—A—A—A
- e) Instructional space (e.g., classrooms) A—A—A—A
- f) Technologically competent staff A—A—A—A
- g) Technology and media resources to support teaching A—A—A—A
- h) Technology and media resources to support student learning and expression A—A—A—A
- i) Resources for students with learning disabilities A—A—A—A
- j) Internet connection A—A—A—A

**B. Resources for Reading Instruction**

- a) Teachers with a specialization in reading A—A—A—A
- b) Computer software/ applications for reading instruction A—A—A—A
- c) Library resources (books, ebooks, magazines, etc.) A—A—A—A
- d) Instructional materials for reading (e.g., reading series, textbooks) A—A—A—A

# School Emphasis on Academic Success

13

How would you characterize each of the following within your school?

Click **one** circle for each row.

Very high  
High  
Medium  
Low  
Very low

- a) Teachers' understanding of the school's curricular goals A—A—A—A—A
- b) Teachers' degree of success in implementing the school's curriculum A—A—A—A—A
- c) Teachers' expectations for student achievement A—A—A—A—A
- d) Teachers' ability to inspire students A—A—A—A—A
- e) Collaboration between school leadership and teachers to plan instruction A—A—A—A—A
- f) Parental involvement in school activities A—A—A—A—A
- g) Parental commitment to ensure that students are ready to learn A—A—A—A—A
- h) Parental expectations for student achievement A—A—A—A—A
- i) Parental support for student achievement A—A—A—A—A
- j) Students' desire to do well in school A—A—A—A—A
- k) Students' ability to reach

school's academic goals

A—A—A—A—A

l) Students' respect for  
classmates who excel academically

A—A—A—A—A

To what degree is each of the following a problem among fourth-grade students in your school?

Click **one** circle for each row.

**Not a problem**

**Minor problem**

**Moderate problem**

**Serious problem**

a) Arriving late at school      A—A—A—A

b) Absenteeism (i.e.,  
unjustified absences)      A—A—A—A

c) Classroom disturbance      A—A—A—A

d) Cheating      A—A—A—A

e) Profanity      A—A—A—A

f) Vandalism      A—A—A—A

g) Theft      A—A—A—A

h) Intimidation or verbal abuse  
among students (including  
texting, emailing, etc.)      A—A—A—A

i) Physical fights among  
students      A—A—A—A

j) Intimidation or verbal abuse  
of teachers or staff (including  
texting, emailing, etc.)      A—A—A—A

---

**In your school, are any of the following used to evaluate the practice of fourth-grade teachers?**

*Click **one** circle for each row.*

**Yes**

**No**

a) Observations by the principal or senior staff

A  A

b) Observations by inspectors or other persons external to the school

A  A

c) Student achievement

A  A

d) Teacher peer review

A  A



**About how many of the students in your school have basic literacy skills (e.g., can write letters of the alphabet, write sentences) when they begin the first grade of primary/elementary school?**

*Click **one** circle only.*

- |               |                         |
|---------------|-------------------------|
| Less than 25% | <input type="radio"/> A |
| 25 -50%       | <input type="radio"/> A |
| 51 -75%       | <input type="radio"/> A |
| More than 75% | <input type="radio"/> A |

At which grade do the following reading skills and strategies **first** receive a **major emphasis** in instruction in your school?

Click **one** circle for each row.

First grade or earlier

Second grade

Third grade

Fourth grade

Not in these grades

- a) Knowing letters of the alphabet A—A—A—A—A
- b) Knowing letter-sound relationships A—A—A—A—A
- c) Reading words A—A—A—A—A
- d) Reading isolated sentences A—A—A—A—A
- e) Reading connected text A—A—A—A—A
- f) Locating information within the text A—A—A—A—A
- g) Identifying the main idea of a text A—A—A—A—A
- h) Explaining or supporting understanding of a text A—A—A—A—A
- i) Comparing a text with personal experience A—A—A—A—A
- j) Comparing different texts A—A—A—A—A
- k) Making predictions about what will happen next in a text A—A—A—A—A
- l) Making generalizations and drawing inferences based on a text A—A—A—A—A
- m) Evaluating and critiquing the style or structure of a text A—A—A—A—A
- n) Determining the author’s perspective or intention A—A—A—A—A

## Principal Experience and Education

18

---

By the end of this school year, how many years will you have been a principal altogether?

\_\_\_\_\_ years  
Please **round** to the nearest whole number.

19

---

By the end of this school year, how many years will you have been a principal at this school?

\_\_\_\_\_ years  
Please **round** to the nearest whole number.

20

---

What is the highest level of formal education you have completed?

Click **one** circle only.

Did not complete a 4-year college or university degree  
(i.e. Bachelor's degree)  A

Completed a 4-year college or university degree  
(i.e. Bachelor's degree)  A

Completed a Master's degree, postgraduate certificate  
program (e.g. teaching), or professional degree  
(e.g. law, medicine, dentistry)  A

Completed a doctorate (Ph.D. or Ed.D.)  A

---

Do you hold the following qualifications or credentials in educational leadership?

Click **one** circle for each row.

Yes

No

a) A Certificate or License

A  A

b) A Master's degree, postgraduate certificate program (e.g., teaching), or professional degree (e.g., law, medicine, dentistry)

A  A

c) A doctorate (Ph.D. or Ed.D.)

A  A

# Thank You

Thank you for the thought, time, and effort you have put into completing this questionnaire.

# Grade 4



Identification Label

PROGRESS IN INTERNATIONAL READING LITERACY STUDY

# Teacher Questionnaire

## Grade 4

**National Center for Education Statistics  
Institute of Education Sciences  
550 12th Street, SW  
Washington, DC 20202, USA**

## Field Test Version

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OMB No. 1850-0645, Approval Expires 04/30/2022.



**TIMSS & PIRLS**  
International Study Center  
Lynch School of Education  
BOSTON COLLEGE

Your school has agreed to participate in PIRLS (Progress in International Reading Literacy Study) 2021, an educational research project sponsored by the International Association for the Evaluation of Educational Achievement (IEA). PIRLS measures trends in student achievement in reading and studies differences in national education systems in almost 60 countries in order to help improve teaching and learning worldwide.

This questionnaire is addressed to teachers of fourth-grade students, and seeks information about teachers' academic and professional backgrounds, classroom resources, instructional practices, and attitudes toward teaching. Since your class has been selected as part of a nationwide sample, your responses are very important in helping to describe primary/elementary education in the United States.

Some of the questions in the questionnaire refer to the "PIRLS class" or "this class." This is the class that is identified on the front of this booklet, and which will be tested as part of PIRLS in your school. If you teach some but not all of the students in the PIRLS class, please think only of the students that you teach when answering these class-specific questions. It is important that you answer each question carefully so that the information that you provide reflects your situation as accurately as possible.

Since PIRLS is an international study and all countries are using the same questionnaire, you may find that some of the questions seem unusual or are not entirely relevant to you or schools in the United States. Nevertheless, it is important that you do your best to answer all of the questions so comparisons can be made across countries in the study.

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## About You

1

---

By the end of this school year, how many years will you have been teaching altogether?

\_\_\_\_\_ years

Please **round** to the nearest whole number.

2

---

Which of these describes you?

Click **one** circle only.

Female                      A

Male                         A

Other                        A

3

---

How old are you?

Click **one** circle only.

Under 25                    A

25–29                        A

30–39                        A

40–49                        A

50–59                        A

60 or more                 A



What is the **highest** level of formal education you have completed?

Click **one** circle only.

Did not complete high school  A

Completed high school  A

**(If you have not completed more than high school, go to question #6)**

Completed a 2-year college or university degree (i.e., Associate's degree)  A

Completed a 4-year college or university degree (i.e., Bachelor's degree)  A

Completed a Master's degree, postgraduate certificate program (e.g., teaching),  
or professional degree (e.g., law, medicine, dentistry)  A

Completed a doctorate (Ph.D. or Ed.D)  A

**A. During your college or university education, what was your major or main area(s) of study?**

Click **one** circle for each row.

Yes

No

a) Education—Primary/Elementary  Yes  No

b) Education—Secondary  Yes  No

c) English  Yes  No

d) Other  Yes  No

**B. As part of your formal education and/or training, to what extent did you study the following areas?**

*Click **one** circle for each row.*

**Not at all**

**Overview or introduction to topic**

**It was an area of emphasis**

- |                                     |       |
|-------------------------------------|-------|
| a) English                          | A—A—A |
| b) Literature                       | A—A—A |
| c) Pedagogy/teaching reading        | A—A—A |
| d) Educational psychology           | A—A—A |
| e) Learning support                 | A—A—A |
| f) Reading theory                   | A—A—A |
| g) Special education                | A—A—A |
| h) Second language learning         | A—A—A |
| i) Assessment methods<br>in reading | A—A—A |
| j) Early childhood education        | A—A—A |
| k) Digital literacies               | A—A—A |

---

**How often do you read for enjoyment?**

*Click **one** circle only.*

- |                               |                       |
|-------------------------------|-----------------------|
| Every day or almost every day | <input type="radio"/> |
| Once or twice a week          | <input type="radio"/> |
| Once or twice a month         | <input type="radio"/> |
| Never or almost never         | <input type="radio"/> |

---

**A. In the past two years, have you participated in formal professional development in reading (e.g., workshops, seminars, lesson studies)?**

*Click **one** circle for each row.*

Yes  
No

- |  |                       |                       |
|--|-----------------------|-----------------------|
| a) Teaching reading comprehension skills or strategies                         | <input type="radio"/> | <input type="radio"/> |
| b) Integrating literacies across the curriculum                                | <input type="radio"/> | <input type="radio"/> |
| c) Addressing students' language needs in teaching reading                     | <input type="radio"/> | <input type="radio"/> |
| d) Integrating technology into reading instruction                             | <input type="radio"/> | <input type="radio"/> |
| e) Instruction related to digital literacies                                   | <input type="radio"/> | <input type="radio"/> |
| f) Addressing differentiation of instruction for students' needs and interests | <input type="radio"/> | <input type="radio"/> |
| g) Assessing students' reading   | <input type="radio"/> | <input type="radio"/> |

**B. How would you prioritize your need for future professional development?**

Click **one** circle for each row.

**High**

**Medium**

**Low**

a) Teaching reading comprehension skills or strategies

A  A  A

b) Integrating literacies across the curriculum

A  A  A

c) Addressing students' language needs in teaching reading

A  A  A

d) Integrating technology into reading instruction

A  A  A

e) Instruction related to digital literacies

A  A  A

f) Addressing differentiation of instruction for students' needs and interests

A  A  A

g) Assessing students' reading

A  A  A

---

**How helpful is each type of professional development?**

Click **one** circle for each row.

**Helpful**

**Somewhat helpful**

**Not helpful**

a) Workshops

A—A—A

b) Seminars

A—A—A

c) Access to a mentor  
(e.g., literacy coach)

A—A—A

d) Teacher professional  
learning communities

A—A—A

e) Online professional  
development

A—A—A

---

To what extent are each of these a disincentive to participate in professional development?

Click **one** circle for each row.

Not at all

Some

A lot

a) Financial costs

A—A—A

b) Time conflicts

A—A—A

c) Content is not relevant

A—A—A

d) Lack of support from  
school administrators

A—A—A

# School Emphasis on Academic Success

How would you characterize each of the following within your school?

Click **one** circle for each row.

Very high

High

Medium

Low

Very low

- a) Teachers' understanding of the school's curricular goals A—A—A—A—A
- b) Teachers' degree of success in implementing the school's curriculum A—A—A—A—A
- c) Teachers' expectations for student achievement A—A—A—A—A
- d) Teachers' ability to inspire students A—A—A—A—A
- e) Collaboration between school leadership and teachers to plan instruction A—A—A—A—A
- f) Parental involvement in school activities A—A—A—A—A
- g) Parental commitment to ensure that students are ready to learn A—A—A—A—A
- h) Parental expectations for student achievement A—A—A—A—A
- i) Parental support for student achievement A—A—A—A—A
- j) Students' desire to do well in school A—A—A—A—A
- k) Students' ability to reach school's academic goals A—A—A—A—A

l) Students' respect for  
classmates who excel academically A—A—A—A—A



# School Environment

Thinking about your current school, indicate the extent to which you agree or disagree with each of the following statements.

Click **one** circle for each row.

Agree a lot

Agree a little

Disagree a little

Disagree a lot

a) This school is located in a safe neighborhood      A—A—A—A

b) I feel safe at this school      A—A—A—A

c) This school's security policies and practices are sufficient      A—A—A—A

d) The students behave in an orderly manner      A—A—A—A

e) The students are respectful of the teachers      A—A—A—A

f) The students respect school property      A—A—A—A

g) This school has clear rules about student conduct      A—A—A—A

h) This school's rules are enforced in a fair and consistent manner      A—A—A—A

i) The students are respectful of each other      A—A—A—A

# About Being a Teacher

How often do you feel the following way about being a teacher?

Click **one** circle for each row.

**Very often**

**Often**

**Sometimes**

**Never or almost never**

a) I am content with my profession as a teacher

A—A—A—A

b) I find my work full of meaning and purpose

A—A—A—A

c) I am enthusiastic about my job

A—A—A—A

d) My work inspires me

A—A—A—A

e) I am proud of the work I do

A—A—A—A

f) I feel appreciated as a teacher

A—A—A—A

## About Teaching Reading to the PIRLS class

13

---

**A. How many students are in this class?**

\_\_\_\_\_ students  
*Type in the number.*

**B. How many of the students in question #13a are in fourth grade?**

\_\_\_\_\_ fourth-grade students  
*Type in the number.*

14

---

**A. How many fourth-grade students experience difficulties understanding spoken English?**

\_\_\_\_\_ students in this class  
*Type in the number.*

**B. How many fourth-grade students experience difficulties in reading?**

\_\_\_\_\_ students in this class  
*Type in the number.*

**In your view, to what extent do the following limit how you teach this class?**

Click **one** circle for each row.

**Not at all**

**Some**

**A lot**

- |   |       |
|---|-------|
| a) Students lacking prerequisite knowledge or skills            | A—A—A |
| b) Students suffering from lack of basic nutrition              | A—A—A |
| c) Students suffering from not enough sleep                     | A—A—A |
| d) Students absent from class                                   | A—A—A |
| e) Disruptive students  | A—A—A |
| f) Uninterested students  | A—A—A |
| g) Students with mental, emotional, or psychological impairment | A—A—A |
| h) Students needing extra support in reading                    | A—A—A |

**In a typical week, how much time do you spend on English language instruction and/or activities with the students?**

*Include instruction or activities in reading, writing, speaking, listening, literature, and other language skills.*

\_\_\_\_\_ minutes per week

*Type in the number of minutes per week.*

*Please convert the number of hours into minutes.*

Regardless of whether or not you have formally scheduled time for reading instruction, in a typical week about how much time do you spend on reading instruction and/or activities with the students?

*Include things you do across curriculum areas and during formally scheduled time for reading instruction.*

\_\_\_\_\_ minutes per week

*Type in the number of minutes per week.*

*Please convert the number of hours into minutes.*

When you have reading instruction and/or do reading activities, how often do you organize students in the following ways?

*Click **one** circle for each row.*

**Always or almost always**

**Often**

**Sometimes**

**Never**

a) I teach reading as a whole-class activity

A—A—A—A

b) I create same-ability groups

A—A—A—A

c) I create mixed-ability groups

A—A—A—A

d) I use individualized instruction for reading

A—A—A—A

e) Students work independently on an assigned plan or goal

A—A—A—A

When you have reading instruction and/or do reading activities with the students, how often do you have the students read the following types of text (in print or digitally)?

Click **one** circle for each row.

Every day or almost every day

Once or twice a week

Once or twice a month

Never or almost never

### A. Literary Reading Materials

a) Short stories (e.g., fables, fairy tales, action stories, science fiction, detective stories)

A—A—A—A

b) Longer fiction books with chapters

A—A—A—A

c) Plays

A—A—A—A

d) Poems/poetry

A—A—A—A

### B. Informational Reading Materials

a) Nonfiction subject area books or textbooks

A—A—A—A

b) Longer nonfiction books with chapters

A—A—A—A

c) Nonfiction articles that describe and explain about things, people, events, or how things work (e.g., newspaper articles, brochures)

A—A—A—A

d) Non-continuous texts (e.g., diagrams, maps, illustrations, photographs, tables)

A—A—A—A

**When you have reading instruction and/or do reading activities with the students, how often do you do the following?**

*Click **one** circle for each row.*

**Every day or almost every day**

**Once or twice a week**

**Once or twice a month**

**Never or almost never**

- |  |         |
|--|---------|
| a) Read aloud to students                                  | A—A—A—A |
| b) Ask students to read aloud                              | A—A—A—A |
| c) Ask students to read silently on their own              | A—A—A—A |
| d) Teach students strategies for decoding sounds and words | A—A—A—A |
| e) Teach students new vocabulary systematically            | A—A—A—A |
| f) Provide opportunities for students to develop fluency   | A—A—A—A |

**How often do you do the following in teaching reading to this class?**

Click **one** circle for each row.

**Every or almost every lesson**

**About half the lessons**

**Some lessons**

**Never**

- a) Provide reading materials that match the students' interests A—A—A—A
- b) Provide materials that are appropriate for the reading levels of individual students A—A—A—A
- c) Link new content to students' prior knowledge A—A—A—A
- d) Encourage students to deepen their understandings of the text A—A—A—A
- e) Encourage student discussions of texts A—A—A—A
- f) Encourage students to challenge the opinion expressed in the text A—A—A—A
- g) Encourage students to read texts with multiple perspectives A—A—A—A
- h) Give students time to read books of their own choosing A—A—A—A
- i) Give individualized feedback to each student A—A—A—A



**How often do you ask the students to do the following things to help develop reading comprehension skills or strategies?**

Click **one** circle for each row.

**Every day or almost every day**

**Once or twice a week**

**Once or twice a month**

**Never or almost never**

a) Locate information within the text

A—A—A—A

b) Identify the main ideas of what they have read

A—A—A—A

c) Explain or support their understanding with text evidence

A—A—A—A

d) Compare what they have read with experiences they have had

A—A—A—A

e) Compare what they have read with other things they have read

A—A—A—A

f) Make predictions about what will happen next in the text they are reading

A—A—A—A

g) Make generalizations and draw inferences based on what they have read

A—A—A—A

h) Evaluate and critique the style or structure of the text they have read

A—A—A—A

i) Determine the author's perspective or intention

A—A—A—A

j) Self-monitor their reading (e.g., recognize when they don't understand)

A—A—A—A

k) Use skimming or scanning strategies

A—A—A—A

---

After students have read something, how often do you ask them to do the following?

Click **one** circle for each row.

Every day or almost every day

Once or twice a week

Once or twice a month

Never or almost never

a) Write something about or  
in response to what they  
have read

A—A—A—A

b) Answer oral questions  
about or orally summarize  
what they have read

A—A—A—A

c) Talk with each other about  
what they have read

A—A—A—A

d) Take a written quiz or test  
about what they have read

A—A—A—A

e) Create a multi-modal  
response (e.g., image, audio,  
text, video, performance)

A—A—A—A

## Computer and Library Resources

24

---

**A. Do the students in this class ever have digital devices (desktop computers, laptops, or tablets) available to use during reading instruction?**

*Click **one** circle only.*

Yes             A

No              A

**(If No, go to question #25)**

If Yes,

**B. What access do the students have to digital devices?**

*Click **one** circle for each row.*

**Yes**

**No**

a)The school provides each student with a digital device

A

b)The class has digital devices that students can share

A

c)The school has digital devices that the class can use sometimes

A

d)Students bring their own digital devices

A

**C. How confident are you using digital devices in your instruction?**

*Click **one** circle only.*

Very confident

A

Confident

A

Somewhat confident

A

Not confident

A

(continued)

(continued)

**D. How often do you use digital devices during reading activities to support learning for:**

*Click one circle for each row.*

**Every day or almost every day**

**Once or twice a week**

**Once or twice a month**

**Never or almost never**

- a) Whole class                    A—A—A—A
- b) Low-performing students    A—A—A—A
- c) High-performing students    A—A—A—A
- d) Students with special needs A—A—A—A

**E. How often do you have students use digital devices during reading instruction?**

*Click one circle for each row.*

**Every day or almost every day**

**Once or twice a week**

**Once or twice a month**

**Never or almost never**

- a) Ask students to read digital texts                    A—A—A—A
- b) Teach students strategies for reading digital texts    A—A—A—A
- c) Teach students to be critical when reading on the Internet    A—A—A—A
- d) Ask students to look up facts and definitions                    A—A—A—A
- e) Ask students to do a research project on a particular topic or problem                    A—A—A—A

f) Ask students to write stories or other texts

A—A—A—A

g) Ask students to create a presentation or communication (e.g., video)

A—A—A—A

**A. Do you have a library or reading corner in your classroom?***Click **one** circle only.*Yes  ANo  A**(If No, go to question #26)**

If Yes,

**B. About how many books with different titles are in your classroom library?***Click **one** circle only.*0–25  A26–50  A51–100  AMore than 100  A**C. About how many magazines with different titles are in your classroom library?***Click **one** circle only.*0  A1–2  A3–5  AMore than 5  A**D. How often do you give the students in your class time to use the classroom library or reading corner?***Click **one** circle only.*Every day or almost every day  AOnce or twice a week  AOnce or twice a month  ANever or almost never  A

**E. Can the students borrow books from the classroom library or reading corner to take home?**

*Click **one** circle only.*

Yes

A

No

A



---

**How often do you take or send the students to the school or local library?**

*Click **one** circle only.*

- |                               |                       |
|-------------------------------|-----------------------|
| At least once or twice a week | <input type="radio"/> |
| Once or twice a month         | <input type="radio"/> |
| A few times a year            | <input type="radio"/> |
| Never or almost never         | <input type="radio"/> |

## Reading Homework

27

---

**How often do you assign reading as part of homework (for any subject)?**

*Click **one** circle only.*

I do not assign reading for homework       A

**(Go to question #30)**

Less than once a week       A

1 or 2 times a week       A

3 or 4 times a week       A

Every day       A

28

---

**In general, how much time do you expect students to spend on homework involving reading (for any subject) each time you assign it?**

*Click **one** circle only.*

15 minutes or less       A

16–30 minutes       A

31–60 minutes       A

More than 60 minutes       A

---

**How often do you do the following with the reading homework assignments for this class?**

Click **one** circle for each row.

**Always or almost always**

**Sometimes**

**Never or almost never**

a) Correct assignments and give feedback to students

A—A—A

b) Discuss the homework in class

A—A—A

c) Monitor whether or not the homework was completed

A—A—A

---

**How much importance do you place on the following assessment strategies in reading?**

Click **one** circle for each row.

**A lot**

**Some**

**None**

a) Observing students as they work

A — A — A

b) Asking students to answer questions during class

A — A — A

c) Short, regular written assessments (paper or digital)

A — A — A

d) Longer tests (e.g., unit tests or exams)

A — A — A

e) Long-term projects (e.g., reading logs)

A — A — A

---

About how often do students in this class take reading assessments on digital devices?

*Click **one** circle only.*

- |                        |                       |
|------------------------|-----------------------|
| More than once a month | <input type="radio"/> |
| Once a month           | <input type="radio"/> |
| Twice a year           | <input type="radio"/> |
| Once a year            | <input type="radio"/> |
| Never                  | <input type="radio"/> |

# Thank You

Thank you for the thought, time, and effort you have put into completing this questionnaire.

# Grade 4



**TIMSS & PIRLS**  
International Study Center  
Lynch School of Education  
BOSTON COLLEGE



Name:

Username:

Password:

**Log in**

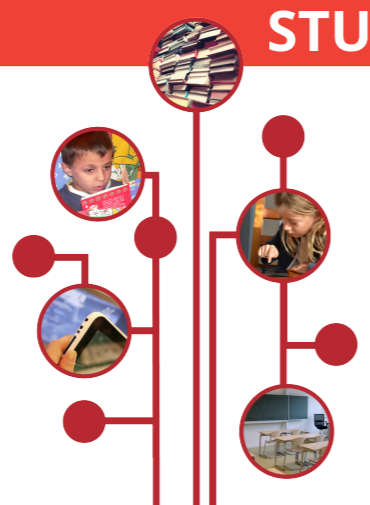
The National Center for Education Statistics (NCES) is authorized to conduct this study under the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543), and to collect students' education records from educational agencies or institutions for the purpose of evaluating federally supported education programs under the Family Educational Rights and Privacy Act (FERPA, 34 CFR §§ 99.31(a)(3)(iii) and 99.35). All of the information you provide 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 (20 U.S.C. §9573 and 6 U.S.C. §151).

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OMB No. 1850-0645, Approval Expires 04/30/2022.



**STUDENT QUESTIONNAIRE**



Please wait for the Test Administrator to give you the password.

**Password for Student Questionnaire:**

**Start →**



## Directions

In this questionnaire, you will find questions about you and what you think. For each question, you should choose the answer you think is best. Let us take a few minutes to practice the kinds of questions you will answer in this questionnaire. Example 1 is one kind of question you will find in this questionnaire.

### Example 1

Do you go to school?

Click **one** circle only.

Yes

No



Example 2 is another kind of question you will find in this questionnaire.

### Example 2

How often do you do these things?

Click **one** circle for each row.

	Every day or almost every day	Once or twice a week	Once or twice a month	Never or almost never
<b>a)</b> I talk with my friends.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>b)</b> I play sports.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>c)</b> I ride a skateboard.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



Example 3 is another kind of question you will find in this questionnaire.

### Example 3

What do you think? Click to show how much you agree with these statements.

Click **one** circle for each row.

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
<b>a)</b> Watching movies is fun.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>b)</b> I like eating ice cream.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>c)</b> I do not like waking up early.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>d)</b> I enjoy doing chores.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

- Read each question carefully, and pick the answer you think is best.
- Click the circle next to or under your answer.
- Ask for help if you do not understand something or are not sure how to answer.
- You may change your answers at any time before submitting the questionnaire.



## About you

1a.

.....

Which of these describes you?

Click **one** circle only.

Girl

Boy

Other



1.b

.....

Are you Hispanic or Latino?

*Click **one** circle only.*

Yes, I am Hispanic or Latino

No, I am not Hispanic or Latino



1c.

Which of the following best describes you?

*Click **one or more** circles.*

- 1. White
- 2. Black or African American
- 3. Asian
- 4. American Indian or Alaska Native
- 5. Native Hawaiian or other Pacific Islander



2.

When were you born?

*Click the circles next to the month and year you were born.*

**a) Month**

January	<input type="radio"/>
February	<input type="radio"/>
March	<input type="radio"/>
April	<input type="radio"/>
May	<input type="radio"/>
June	<input type="radio"/>
July	<input type="radio"/>
August	<input type="radio"/>
September	<input type="radio"/>
October	<input type="radio"/>
November	<input type="radio"/>
December	<input type="radio"/>

**b) Year**

2008	<input type="radio"/>
2009	<input type="radio"/>
2010	<input type="radio"/>
2011	<input type="radio"/>
2012	<input type="radio"/>
2013	<input type="radio"/>
2014	<input type="radio"/>
Other	<input type="radio"/>



3a

How often do you speak English at home?

Click **one** circle only.

I always speak English at home.

I almost always speak English at home.

I sometimes speak English and sometimes speak another language at home.

I never speak English at home.

If **Always**, please go to question 4

If **Almost always**, **Sometimes**, or **Never**, please go to question 3B





3b

.....

What language do you speak at home (other than English)?

*Click **one** circle only.*

1. Spanish

2. Other (Please specify) \_\_\_\_\_



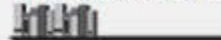
4

About how many books are there in your home? (Do not count magazines, newspapers, or your school books.)

Click **one** circle only.

None or very few (0–10 books)

This shows 10 books



Enough to fill one shelf  
(11–25 books)

This shows 25 books



Enough to fill one bookcase  
(26–100 books)

This shows 100 books



Enough to fill two bookcases  
(101–200 books)

This shows 200 books



Enough to fill three or more bookcases  
(more than 200)

This shows more than 200 books



5a

.....

About how often are you absent from school?

*Click **one** circle only.*

- Once a week
- Once every two weeks
- Once a month
- Once every two months
- Never or almost never



5b

How many days were you absent from school in the last month?

Click **one** circle only.

- 1. None
- 2. 1 or 2 days
- 3. 3 or 4 days
- 4. 5 to 10 days
- 5. More than 10 days



6.

.....

Have you ever repeated a grade in elementary school?

*Click **one** circle only.*

1. Yes

2. No



7

How often do you feel this way when you arrive at school?

Click **one** circle for each row.

	Every day	Almost every day	Sometimes	Never
<b>a)</b> I feel tired.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>b)</b> I feel hungry.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



8

How much time do you spend using a computer or tablet to do these activities for your schoolwork on a normal school day?

Click **one** circle for each row.

	No time	30 minutes or less	More than 30 minutes
<b>a)</b> Finding and reading information	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>b)</b> Preparing reports and presentations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



9

How much do you agree with these statements about using computers or tablets?

Click **one** circle for each row.

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
<b>a)</b> I am good at using a computer or tablet.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>b)</b> I am good at typing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>c)</b> It is easy for me to find information on the Internet.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>d)</b> I know how to create text documents using a computer or tablet.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>e)</b> I know how to create presentations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Continued on next screen





## 9 continued

How much do you agree with these statements about using computers or tablets?

Click **one** circle for each row.

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
<b>f)</b> I know how to use keywords to search for information on the Internet.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>g)</b> I know how to use a link to go to a website.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>h)</b> I know how to find things on a website.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>i)</b> I can move from one website to another.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



## Your school

**10**

What do you think about your school? Click to show how much you agree with these statements.

Click **one** circle for each row.

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
<b>a)</b> I like being in school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>b)</b> I feel safe when I am at school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>c)</b> I feel like I belong at this school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>d)</b> Teachers at my school are fair to me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>e)</b> I am proud to go to this school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>f)</b> I have friends at this school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



**11**

During this year, how often have other students from your school done any of the following things to you, including through texting or the Internet?

Click **one** circle for each row.

	At least once a week	Once or twice a month	A few times a year	Never
<b>a)</b> Made fun of me or called me names	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>b)</b> Left me out of their games or activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>c)</b> Spread lies about me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>d)</b> Stole something from me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>e)</b> Damaged something of mine on purpose	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Continued on next screen



**11** continued

During this year, how often have other students from your school done any of the following things to you, including through texting or the Internet?

Click **one** circle for each row.

	At least once a week	Once or twice a month	A few times a year	Never
<b>f)</b> Hit or hurt me (e.g., shoving, hitting, kicking)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>g)</b> Made me do things I didn't want to do	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>h)</b> Sent me nasty or hurtful messages online	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>i)</b> Shared nasty or hurtful information about me online	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>j)</b> Threatened me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



## Reading in school

12

Think about the reading you do for school. How much do you agree with these statements about your reading lessons?

Click **one** circle for each row.

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
<b>a)</b> I like what I read about in school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>b)</b> My teacher gives me interesting things to read.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>c)</b> I know what my teacher expects me to do.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>d)</b> My teacher is easy to understand.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>e)</b> I am interested in what my teacher says.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Continued on next screen



## 12 continued

Think about the reading you do for school. How much do you agree with these statements about your reading lessons?

Click **one** circle for each row.

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
<b>f)</b> My teacher encourages me to say what I think about what I have read.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>g)</b> My teacher lets me show what I have learned.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>h)</b> My teacher does a variety of things to help us learn.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>i)</b> My teacher tells me how to do better when I make a mistake.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



13

How often do these things happen during your reading lessons?

Click **one** circle for each row.

	Every or almost every lesson	About half the lessons	Some lessons	Never
<b>a)</b> Students don't listen to what the teacher says.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>b)</b> There is too much noise for students to work well.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>c)</b> My teacher has to wait a long time for students to be quiet.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>d)</b> Students interrupt the teacher.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>e)</b> My teacher has to keep telling us to follow the classroom rules.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



14

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In school, how often do these things happen?

Click **one** circle for each row.

	Every day or almost every day	Once or twice a week	Once or twice a month	Never or almost never
<b>a)</b> I read silently on my own.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>b)</b> I read things that I choose myself.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>c)</b> My teacher asks us in class to talk about what we have read.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>





## Using the library

15

How often do you borrow books (including ebooks) from your school or local library?

*Click **one** circle only.*

- At least once a week
- Once or twice a month
- A few times a year
- Never or almost never



## Reading outside of school

16

How much time do you spend reading outside of school on a normal school day?

*Click **one** circle only.*

- Less than 30 minutes
- 30 minutes up to 1 hour
- From 1 hour up to 2 hours
- 2 hours or more



17

How often do you do these things outside of school?

Click **one** circle for each row.

	Every day or almost every day	Once or twice a week	Once or twice a month	Never or almost never
<b>a)</b> I read for fun.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>b)</b> I read to find out about things I want to learn.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



## What you think about reading

18

What do you think about reading? Click to show how much you agree with each of these statements.

Click **one** circle for each row.

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
<b>a)</b> I like talking about what I read with other people.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>b)</b> I would be happy if someone gave me a book as a present.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>c)</b> I think reading is boring.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>d)</b> I would like to have more time for reading.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Continued on next screen



18

continued

What do you think about reading? Click to show how much you agree with each of these statements.

Click **one** circle for each row.

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
<b>e)</b> I enjoy reading.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>f)</b> I learn a lot from reading.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>g)</b> I like to read things that make me think.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>h)</b> I like it when a book helps me imagine other worlds.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



19

How well do you read? Click to show how much you agree with each of these statements.

Click **one** circle for each row.

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
<b>a)</b> I usually do well in reading.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>b)</b> Reading is easy for me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>c)</b> I have trouble reading stories with difficult words.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>d)</b> Reading is harder for me than for many of my classmates.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>e)</b> Reading is harder for me than any other subject.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>f)</b> I am just not good at reading.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



20

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How hard was this test compared to most other tests you have taken this year in school?

*Click **one** circle only.*

- 1. Easier than other tests
- 2. About as hard as other tests
- 3. Harder than other tests
- 4. Much harder than other tests



21

How hard did you try on this test compared to how hard you tried on most other tests you have taken this year in school?

Click **one** circle only.

- 1. Not as hard as on other tests
- 2. About as hard as on other tests
- 3. Harder than on other tests
- 4. Much harder than on other tests





22

How important was it to you to do well on this test?

*Click **one** circle only.*

1. Not very important

2. Somewhat important

3. Important

4. Very important



23


## Activities outside of school

The following questions ask about activities you do outside of school.

Click **one** circle for each row.

	Yes	No
<b>a)</b> Do you play on a sports team outside of school?	<input type="radio"/>	<input type="radio"/>
<b>b)</b> Do you often play a musical instrument outside of school?	<input type="radio"/>	<input type="radio"/>
<b>c)</b> Are you studying something in a class outside of school?	<input type="radio"/>	<input type="radio"/>
<b>d)</b> Do you belong to a club outside of school (like Boy/Girl Scouts, 4-H, or Boys and Girls Club)?	<input type="radio"/>	<input type="radio"/>



Thank you for filling out the questionnaire.  
Click the  button to review your answers.  
Click the SAVE button to finish the questionnaire.

