

Identification Label

**PIRLS 2011**

**Learning  
to Read  
Survey**

**<Grade 4>**

<PIRLS National  
Research Center Name>  
<Address>



**TIMSS & PIRLS**  
International Study Center  
Lynch School of Education, Boston College

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# Learning to Read Survey

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Your child's class has been selected to participate in the Progress in International Reading Literacy Study (PIRLS), a research study about how children learn to read. PIRLS is sponsored by the International Association for the Evaluation of Educational Achievement (IEA) and is being conducted in more than 50 countries around the world.

This survey asks about your child's early learning experiences. We are interested in what you and your child do together and what you think about different things related to your child's school. There are no right or wrong answers to these questions.

The information being collected will be extremely useful for helping understand how young children learn to read and for helping to improve the teaching and learning of reading for all children. We ask that you respond to all of the questions you feel comfortable answering. We would like to reassure you, however, that your responses to this survey are confidential.

**This survey should be completed by the child's parent or current <primary caregiver>, or jointly by both parents or <primary caregivers>.**

**PIRLS**2011

# 1

## This survey was completed by:

Check **one** circle for each line.

	Yes	No
Mother, stepmother, or female guardian -----	<input type="radio"/>	<input type="radio"/>
Father, stepfather, or male guardian -----	<input type="radio"/>	<input type="radio"/>
Other -----	<input type="radio"/>	<input type="radio"/>

**Please turn the page**

## Before Your Child Began Primary/Elementary School

2

Before your child began primary/elementary school, how often did you or someone else in your home do the following activities with him or her?

Check **one** circle for each line.

	Often	Sometimes	Never or almost never
a) Read books -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) Tell stories -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) Sing songs -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) Play with alphabet toys (e.g., blocks with letters of the alphabet) -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) Talk about things you had done -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) Talk about what you had read -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g) Play word games -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h) Write letters or words -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i) Read aloud signs and labels ---	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j) Say counting rhymes or sing counting songs -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k) Play with number toys (e.g., blocks with numbers) ---	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l) Count different things -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
m) Play games involving shapes (e.g., shape sorting toys, puzzles) -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
n) Play with building blocks or construction toys -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
o) Play board games or card games -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

### 3

#### What language did your child speak before he/she began school?

If your child spoke more than one language at the same time, you can check "Yes" for more than one language.

Check **one** circle for each line.

- |                             | Yes                   | No                    |
|-----------------------------|-----------------------|-----------------------|
| a) <language of test> ----- | <input type="radio"/> | <input type="radio"/> |
| b) <country-specific> ----- | <input type="radio"/> | <input type="radio"/> |
| c) <country-specific> ----- | <input type="radio"/> | <input type="radio"/> |
| d) <country-specific> ----- | <input type="radio"/> | <input type="radio"/> |
| e) <country-specific> ----- | <input type="radio"/> | <input type="radio"/> |
| f) Other -----              | <input type="radio"/> | <input type="radio"/> |

### 4

#### A. Did your child attend <ISCED Level 0>?

Check **one** circle only.

Yes---

No---  

(If No, go to #5)

#### If Yes,

#### B. How long was he/she in <ISCED Level 0>?

Check **one** circle only.

3 years or more---

between 2 and 3 years---

2 years---

between 1 and 2 years---

1 year or less---

**5**

**How old was your child when he/she began primary/elementary school?**

Check **one** circle only.

5 years old or younger ---

6 years old ---

7 years old ---

8 years old or older ---

**6**

**How well could your child do the following when he/she began primary/elementary school?**

Check **one** circle for each line.

	Very well	Moderately well	Not very well	Not at all
a) Recognize most of the letters of the alphabet -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) Read some words -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) Read sentences -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) Write letters of the alphabet -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) Write some words -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

# 7

## Could your child do the following when he/she began primary/elementary school?

Check **one** circle for each line.

Up to 100 or higher  
Up to 20  
Up to 10  
Not at all

a) Count by himself/herself -----  —  —  —

More than 4 shapes  
3–4 shapes  
1–2 shapes  
None

b) Recognize different shapes (e.g., square, triangle, circle) -----  —  —  —

All 10 numbers  
5–9 numbers  
1–4 numbers  
None

c) Recognize the written numbers from 1–10 -----  —  —  —

d) Write the numbers from 1–10 -----  —  —  —

Yes No

e) Do simple addition -----  —

f) Do simple subtraction -----  —

### 8

**On average, how much time does your child spend on homework in a day?**

*Check **one** circle only.*

My child does not have  
homework---

15 minutes or less---

16–30 minutes---

31–60 minutes---

More than 60 minutes---



# 9

## How often do you or someone else in your home do the following things with your child?

Check **one** circle for each line.

Every day or almost every day

Once or twice a week

Once or twice a month

Never or almost never

- a) Discuss my child's schoolwork with him/her -----  —  —  —
- b) Help my child with his/her schoolwork -----  —  —  —
- c) Make sure my child sets aside time to do his/her homework -----  —  —  —
- d) Ask my child what he/she learned in school -----  —  —  —
- e) Check if my child has done his/her homework -----  —  —  —
- f) Help my child practice his/her reading -----  —  —  —
- g) Help my child practice his/her math skills -----  —  —  —
- h) Talk with my child about what he/she is reading -----  —  —  —

## 10

### What do you think of your child's school?

Check **one** circle for each line.

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
a) My child's school includes me in my child's education -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) My child's school should make a greater effort to include me in my child's education -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) My child's school provides a safe environment -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) My child's school cares about my child's progress in school -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) My child's school should do better at keeping me informed of his/her progress -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) My child's school does a good job in helping him/her become better in <u>reading</u> -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g) My child's school does a good job in helping him/her become better in <u>mathematics</u> -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h) My child's school does a good job in helping him/her become better in <u>science</u> -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11

**In a typical week, how much time do you usually spend reading for yourself at home, including books, magazines, newspapers, and materials for work (in print or electronically)?**

*Check **one** circle only.*

Less than one hour a week ---

1–5 hours a week ---

6–10 hours a week ---

More than 10 hours a week ---

12

**When you are at home, how often do you read for your own enjoyment?**

*Check **one** circle only.*

Every day or almost every day ---

Once or twice a week ---

Once or twice a month ---

Never or almost never ---

# 13

Please indicate how much you agree with the following statements about reading.

Check **one** circle for each line.

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
a) I read only if I have to -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) I like talking about what I read with other people -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) I like to spend my spare time reading -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) I read only if I need information -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) Reading is an important activity in my home -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) I would like to have more time for reading -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g) I enjoy reading -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**14**

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

*Check **one** circle only.*

0–10---

11–25---

26–100---

101–200---

More than 200---

**15**

**A. About how many children's books are there in your home? (Do not count children's magazines or school books.)**

*Check **one** circle only.*

0–10---

11–25---

26–50---

51–100---

More than 100---

**B. Are these books mainly in <language of test>?**

*Check **one** circle only.*

Yes---

No---

# 16

**When talking at home with your child, what language does the child’s father (or stepfather or male guardian) use most often? What language does the child’s mother (or stepmother or female guardian) use most often?**

*Check **one** circle in each column.*

	<u>Child’s father</u>	<u>Child’s mother</u>
a) <language of test> -----	<input type="radio"/>	<input type="radio"/>
b) <country-specific> -----	<input type="radio"/>	<input type="radio"/>
c) <country-specific> -----	<input type="radio"/>	<input type="radio"/>
d) <country-specific> -----	<input type="radio"/>	<input type="radio"/>
e) <country-specific> -----	<input type="radio"/>	<input type="radio"/>
f) Other -----	<input type="radio"/>	<input type="radio"/>
g) Not applicable -----	<input type="radio"/>	<input type="radio"/>

**17**

**What is the highest level of education completed by the child's father (or stepfather or male guardian) and mother (or stepmother or female guardian)?**

Check **one** circle in each column.

	Child's father	Child's mother
a) Did not go to school -----	○	○
b) Some <ISCED Level 1 or 2> -----	○	○
c) <ISCED Level 2> -----	○	○
d) <ISCED Level 3> -----	○	○
e) <ISCED Level 4> -----	○	○
f) <ISCED Level 5B> -----	○	○
g) <ISCED Level 5A, first degree> -----	○	○
h) Beyond <ISCED Level 5A, first degree> -----	○	○
i) Not applicable -----	○	○

## 18

**How far in his/her education do you expect your child to go?**

*Check **one** circle only.*

- Finish <ISCED Level 2> ---
- Finish <ISCED Level 3> ---
- Finish <ISCED Level 4> ---
- Finish <ISCED Level 5B> ---
- Finish <ISCED Level 5A,  
first degree> ---
- Beyond <ISCED Level 5A,  
first degree> ---



# 19

**Which best describes the employment situation of the child's father (or stepfather or male guardian) and mother (or stepmother or female guardian)?**

Check **one** circle in each column.

	<u>Child's father</u>	<u>Child's mother</u>
a) Working at least full-time for pay (this could be one or more full-time jobs or several part-time jobs that add up to full-time work) -----	<input type="radio"/>	<input type="radio"/>
b) Working part-time only for pay -----	<input type="radio"/>	<input type="radio"/>
c) Not working for pay -----	<input type="radio"/>	<input type="radio"/>
d) Other -----	<input type="radio"/>	<input type="radio"/>
e) Not applicable -----	<input type="radio"/>	<input type="radio"/>

## 20

### **What kind of work do the child's father (or stepfather or male guardian) and mother (or stepmother or female guardian) do for their main jobs?**


For each, check the circle for the job category that best describes what he/she does. Each category has a few examples to help you decide the correct category. If the father or mother is not working now, think about the last job he/she had.

Check **one** circle in each column.

	Child's father	Child's mother
<b>a) Has never worked for pay</b> -----	<input type="radio"/>	<input type="radio"/>
<b>b) Small Business Owner</b> ----- Includes owners of small businesses (fewer than 25 employees) such as retail shops, services, restaurants	<input type="radio"/>	<input type="radio"/>
<b>c) Clerk</b> ----- Includes office clerks; secretaries; typists; data entry operators; customer service clerks	<input type="radio"/>	<input type="radio"/>
<b>d) Service or Sales Worker</b> ----- Includes travel attendants; restaurant service workers; personal care workers; protective service workers; junior military and police; salespersons; street vendors	<input type="radio"/>	<input type="radio"/>
<b>e) Skilled Agricultural or Fishery Worker</b> ----- Includes farmers; forestry workers; fishery workers; hunters and trappers	<input type="radio"/>	<input type="radio"/>
<b>f) Craft or Trade Worker</b> ----- Includes builders, carpenters, plumbers, electricians, metal workers; machine mechanics; handicraft workers	<input type="radio"/>	<input type="radio"/>
<b>g) Plant or Machine Operator</b> ----- Includes plant and machine operators; assembly-line operators; motor-vehicle drivers	<input type="radio"/>	<input type="radio"/>
<b>h) General Laborers</b> ----- Includes domestic helpers and cleaners; building caretakers; messengers, porters, and doorkeepers; farm, fishery, agricultural, and construction workers	<input type="radio"/>	<input type="radio"/>
<b>i) Corporate Manager or Senior Official</b> ----- Includes corporate managers such as managers of large companies (25 or more employees) or managers of departments within large companies; legislators or senior government officials; senior officials of special-interest organizations; military officers	<input type="radio"/>	<input type="radio"/>
<b>j) Professional</b> ----- Includes scientists; mathematicians; computer scientists; architects; engineers; life science and health professionals; teachers; legal professionals; social scientists; writers and artists; religious professionals	<input type="radio"/>	<input type="radio"/>
<b>k) Technician or Associate Professional</b> ----- Includes science, engineering, and computer associates and technicians; life science and health technicians and assistants; teacher aides; finance and sales associate professionals; business service agents; administrative assistants	<input type="radio"/>	<input type="radio"/>
<b>l) Not applicable</b> -----	<input type="radio"/>	<input type="radio"/>

# Thank You

**Thank you for taking the time  
to fill out this survey.**











**BOSTON  
COLLEGE**

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# **PIRLS 2011**

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### **<Grade 4>**



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