

Learning to Read Survey

# PIRLS 2011

## Learning to Read Survey

<Grade 4>

<PIRLS National  
Reading Curriculum Number>  
<Address>

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

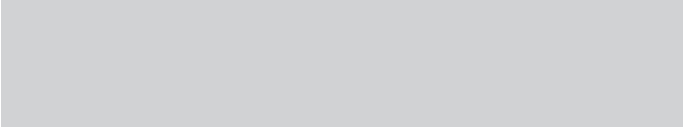
# Learning to Read Survey

This survey is part of the Progress in International Reading Study (PIRLS), a large-scale international assessment of reading literacy for young children. The PIRLS survey is designed to measure the reading literacy skills of children in the fourth grade (ages 9-10) in 41 countries. The PIRLS survey is the first in a series of international assessments of reading literacy skills for young children. The PIRLS survey is the first in a series of international assessments of reading literacy skills for young children. The PIRLS survey is the first in a series of international assessments of reading literacy skills for young children.

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



## 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 -----	A	A	A
b) Tell stories -----	A	A	A
c) Sing songs -----	A	A	A
d) Play with alphabet toys (e.g., blocks with letters of the alphabet) -----	A	A	A
e) Talk about things you had done -----	A	A	A
f) Talk about what you had read -----	A	A	A
g) Play word games -----	A	A	A
h) Write letters or words -----	A	A	A
i) Read aloud signs and labels ---	A	A	A
j) Say counting rhymes or sing counting songs -----	A	A	A
k) Play with number toys (e.g., blocks with numbers) ---	A	A	A
l) Count different things -----	A	A	A
m) Play games involving shapes (e.g., shape sorting toys, puzzles) -----	A	A	A
n) Play with building blocks or construction toys -----	A	A	A
o) Play board games or card games -----	A	A	A

### 3

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

If our 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 -----  —  —  —

b) Read some words -----  —  —  —

c) Read sentences -----  —  —  —

d) Write letters of the alphabet -----  —  —  —

e) Write some words ~~-----~~

# 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 ----- A — A — A — A

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

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

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

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

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

Yes No

e) Do simple addition ----- A — A

f) Do simple subtraction ----- A — A

### 8

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

Check **one** circle onl .

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 ---- A — A — A — A
- b) My child's school should make a greater effort to include me in my child's education ----- A — A — A — A
- c) My child's school provides a safe environment ----- A — A — A — A
- d) My child's school cares about my child's progress in school ----- A — A — A — A
- e) My child's school should do better at keeping me informed of his/her progress ----- A — A — A — A
- f) My child's school does a good job in helping him/her become better in reading ----- A — A — A — A
- g) My child's school does a good job in helping him/her become better in mathematics ----- A — A — A — A
- h) My child's school does a good job in helping him/her become better in science ----- A — A — A — A

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 onl .

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 onl .

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 -----	A	—	A	—	A	—	A
b) I like talking about what I read with other people -----	A	—	A	—	A	—	A
c) I like to spend my spare time reading -----	A	—	A	—	A	—	A
d) I read only if I need information -----	A	—	A	—	A	—	A
e) Reading is an important activity in my home -----	A	—	A	—	A	—	A
f) I would like to have more time for reading -----	A	—	A	—	A	—	A
g) I enjoy reading -----	A	—	A	—	A	—	A

**14**

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

Check **one** circle onl .

0–10--- A

11–25--- A

26–100--- A

101–200--- A

More than 200--- A

**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 onl .

0–10--- A

11–25--- A

26–50--- A

51–100--- A

More than 100--- A

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

Check **one** circle onl .

Yes--- A

No--- A

## 16

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



## 18

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

Check **one** circle onl .

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.

	Child's father	Child's mother
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) -----	A	A
b) Working part-time only for pay -----	A	A
c) Not working for pay -----	A	A
d) Other -----	A	A
e) Not applicable -----	A	A

**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

# Thank You

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

