

Identification Label

# PIRLS 2011

## Student Questionnaire

<Grade 4>

<PIRLS>

<National Research Center Name>

<Address>



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

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# Directions

In this booklet, 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 booklet.

Example 1 is one kind of question you will find in this booklet.

## Example 1

Do you go to school?

*Fill **one** circle only.*

Yes --

No --

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

## Example 2

How often do you do these things?

*Fill **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) I talk with my friends .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) I play sports .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) 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 booklet.

## Example 3

What do you think? Tell how much you agree with these statements.

Fill **one** circle for each line.

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
a) Watching movies is fun .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) I like eating ice cream .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) I do not like waking up early .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) 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.
- Fill in the circle next to or under your answer.
- If you decide to change your answer, draw an **X** through your first answer, like this: . Then, fill in the circle next to or under your new answer.
- Ask for help if you do not understand something or are not sure how to answer.

# About you

## G1

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Are you a girl or a boy?

*Fill one circle only.*

Girl --

Boy --

## G2

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When were you born?

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

**a) Month**

January --

February --

March --

April --

May --

June --

July --

August --

September --

October --

November --

December --

**b) Year**

1998 --

1999 --

2000 --

2001 --

2002 --

2003 --

2004 --

Other --

# G3

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How often do you speak <language of test> at home?

*Fill **one** circle only.*

I always or almost always  
speak <language of test> at home --

I sometimes speak <language  
of test> and sometimes speak  
another language at home --

I never speak <language  
of test> at home --

# G4

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

Fill **one** circle only.

None or very few (0–10 books) --

This shows 10 books



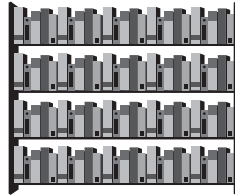
Enough to fill one shelf (11–25 books) --

This shows 25 books



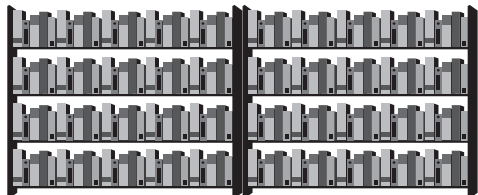
Enough to fill one bookcase  
(26–100 books) --

This shows 100 books



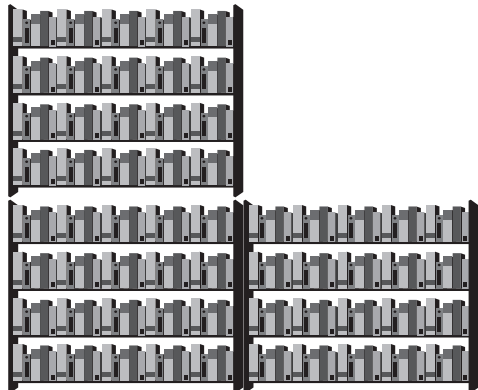
Enough to fill two bookcases  
(101–200 books) --

This shows 200 books



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

This shows more than 200 books



# G5

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Do you have any of these things at your home?

*Fill **one** circle for each line.*

- |  | Yes                   | No                    |
|--|-----------------------|-----------------------|
| a) Computer.....   | <input type="radio"/> | <input type="radio"/> |
| b) Study desk/table for your use .....                           | <input type="radio"/> | <input type="radio"/> |
| c) Books of your very own (do not count your school books) ..... | <input type="radio"/> | <input type="radio"/> |
| d) Your own room.....  | <input type="radio"/> | <input type="radio"/> |
| e) Internet connection.....                                      | <input type="radio"/> | <input type="radio"/> |
| f) <country-specific indicator of wealth> .....                  | <input type="radio"/> | <input type="radio"/> |
| g) <country-specific indicator of wealth> .....                  | <input type="radio"/> | <input type="radio"/> |
| h) <country-specific indicator of wealth>.....                   | <input type="radio"/> | <input type="radio"/> |
| i) <country-specific indicator of wealth> .....                  | <input type="radio"/> | <input type="radio"/> |
| j) <country-specific indicator of wealth> .....                  | <input type="radio"/> | <input type="radio"/> |
| k) <country-specific indicator of wealth> .....                  | <input type="radio"/> | <input type="radio"/> |

## G6

How often do you use a computer in each of these places?

Fill **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) At home .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) At school .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) Some other place .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## G7

How often do the following things happen at home?

Fill **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) My parents ask me what I am learning in school .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) I talk about my schoolwork with my parents .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) My parents make sure that I set aside time for my homework .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) My parents check if I do my homework .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



# Your School

## G8

What do you think about your school? Tell how much you agree with these statements.

Fill **one** circle for each line.

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
a) I like being in school .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) I feel safe when I am at school.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) I feel like I belong at this school.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## G9

During this year, how often have any of the following things happened to you at school?

Fill **one** circle for each line.

	At least once a week	Once or twice a month	A few times a year	Never
a) I was made fun of or called names--	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) I was left out of games or activities by other students .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) Someone spread lies about me.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) Something was stolen from me .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) I was hit or hurt by other student(s) (e.g., shoving, hitting, kicking).....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) I was made to do things I didn't want to do by other students .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

# Reading outside of school

## R1

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

Fill **one** circle only.

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

## R2

How often do you do these things outside of school?

Fill **one** circle for each line.

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

# R3

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How often do you read these things outside of school  
(in print or online)?

Fill **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) I read stories or novels .....  —————  —————  —————
- b) I read books that explain things  
(e.g., you might read about  
your favorite athlete, about animals  
you like, or a place you visited) -----  —————  —————  —————
- c) I read magazines .....  —————  —————  —————
- d) I read comic books .....  —————  —————  —————
- e) <country-specific> .....  —————  —————  —————
- f) <country-specific> .....  —————  —————  —————

# Using the library

**R4** \_\_\_\_\_

How often do you borrow books from your <school or local library>?

*Fill **one** circle only.*

At least once a week --

Once or twice a month --

A few times a year --

Never or almost never --

# Lessons about reading

## R5

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

Fill *one* circle for each line.

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
a) I like what I read about in school .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) My teacher gives me interesting things to read .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) I know what my teacher expects me to do .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) I think of things not related to the lesson .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) My teacher is easy to understand --	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) I am interested in what my teacher says .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g) My teacher gives me interesting things to do .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

# R6

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In school, how often do these things happen?

*Fill **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) I read silently on my own .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) I read books that I choose myself --	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

# What you think about reading

## R7

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

Fill **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 would be happy if someone gave me a book as a present .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) I think reading is boring .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) I would like to have more time for reading .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) I enjoy reading .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

# R8

How well do you read? Tell how much you agree with each of these statements.

Fill **one** circle for each line.

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
a) I usually do well in reading .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) Reading is easy for me .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) Reading is harder for me than for many of my classmates .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) If a book is interesting, I don't care how hard it is to read .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) I have trouble reading stories with difficult words .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) My teacher tells me I am a good reader .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g) Reading is harder for me than any other subject .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



# Reasons for reading

## R9

Do you read for any of the following reasons? Tell how much you agree with each of these statements.

Fill **one** circle for each line.

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
a) I like to read things that make me think .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) It is important to be a good reader .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) My parents like it when I read .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) I learn a lot from reading .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) I need to read well for my future ...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) I like it when a book helps me imagine other worlds .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



**Thank You!**

**Thank you for filling out the questionnaire!**





BOSTON  
COLLEGE

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# PIRLS 2011

## Student Questionnaire

<Grade 4>



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