

<u>ID</u>	
Country	<input type="text"/> <input type="text"/> <input type="text"/>
Region	<input type="text"/> <input type="text"/>
District	<input type="text"/> <input type="text"/>
School	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Instrument	<input type="text" value="3"/>

Southern Africa Consortium for  
Monitoring Educational Quality

and

International Institute for Educational Planning

Grade 6 Reading Study

## School Head Questionnaire

Note: The personal particulars in this questionnaire must be those of the School Head, even though the questionnaire might be completed by another person.

### SOME QUESTIONS ABOUT YOURSELF

1. What is your sex?  
(Please tick only one box.)

  
(1)

Male

  
(2)

Female

2. What is your age?  
(Please tick only one box.)

  
(1)

Under 24 years

  
(2)

25 - 29 years

  
(3)

30 - 34 years

  
(4)

35 - 39 years

  
(5)

40 - 44 years

  
(6)

45 - 49 years

  
(7)

50 years and over



3. How many years of academic education have you completed?  
(Please indicate the number of years in each box.)

3.1   years of primary school

3.2   years of secondary school

3.3   years of post secondary academic education

4. How many years of teacher training have you received **altogether**?  
(Please tick only one box.)

(1) I did not receive any teacher training.

(2) I have had a short course of less than one-year duration.

(3) I have had a total equivalent of one year of teacher training.

(4) I have had a total equivalent of two years of teacher training.

(5) I have had a total equivalent of three years of teacher training.

(6) I have had a total equivalent of more than three years of teacher training.

5. How many years **altogether** have you been a teacher?  
(Please round to '1' if it is less than 1 year.)

years

6. About how many periods/lessons per week do you teach?  
(Please write '0' if you do not teach.)

periods/lessons per week

7. How many minutes are these periods/lessons **altogether** per week?  
(Please write '0' if you do not teach.)

minutes

8. How many years have you been head or acting head of **this school**?  
(Please count the current year as one full year.)

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 years

9. How many years **altogether** have you been a school head or acting head?  
(Please count the current year as one full year.)

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 years

10. Which of the following reflects most accurately the condition of your living accommodation?  
(Please tick only one box.)

- (1) Generally in a poor state
- (2) Some parts require major repairs
- (3) Some parts require minor repairs
- (4) Generally in good condition

### SOME QUESTIONS ABOUT SCHOOL LOCATION

11. How many kilometres is it from your school to:  
(Please round to '1' if it is less than one kilometre.)

- |      |   |   |  |  |  |            |
|------|---|---|--|--|--|------------|
| 11.1 | The nearest health centre/clinic  | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> |  |  |  | kilometres |
|      |   |   |  |  |  |            |
| 11.2 | The nearest tarmac/tarred road  | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> |  |  |  | kilometres |
|      |   |   |  |  |  |            |
| 11.3 | The nearest public library  | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> |  |  |  | kilometres |
|      |   |   |  |  |  |            |
| 11.4 | The nearest book shop   | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> |  |  |  | kilometres |
|      |   |   |  |  |  |            |
| 11.5 | The nearest school offering secondary grades to which most of your graduating pupils go | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> |  |  |  | kilometres |
|      |   |   |  |  |  |            |

12. Which of the following best describes the location of your school?  
(Please tick only one box.)

  
(1)

Isolated

  
(2)

Rural

  
(3)

In or near a small town

  
(4)

In or near a large town or city

SOME QUESTIONS ABOUT YOUR TEACHERS

13. How many full-time teachers (including yourself if you teach at all, and full-time temporary and student teachers) are there in your school this term?  
(Please write the numbers in the boxes below.)

13.1 Male teachers

13.2 Female teachers

14. How many of the full-time teachers in your school have completed the following levels of academic education?  
(Please count each teacher in terms of his/her highest qualification. Please write '0' for a particular category if there are no teachers in it. Please make sure that the total number of teachers in this question agrees with the total number in question 13.)

14.1 Primary school  teachers

14.2 Secondary school  teachers

14.3 Post secondary academic education  teachers

15. How many of the full-time teachers in your school have completed the following teacher training?

*(Please count each teacher in terms of his/her highest category of teacher training. Please write '0' for a particular category if there are no teachers in it. Please make sure that the total number of teachers in this question agrees with the total number in question 13.)*

- 15.1 No teacher training   teachers
- 15.2 A short course of less than one-year of duration   teachers
- 15.3 A total equivalent of one year of teacher training   teachers
- 15.4 A total equivalent of two years of teacher training   teachers
- 15.5 A total equivalent of three years of teacher training   teachers
- 15.6 A total equivalent of more than three years of teacher training   teachers

16. Some teachers live in provided accommodation. Others do not. What is the situation in your school?

*(Please write the number of teachers for each category given. Please ensure that the total agrees with the total for question 13.)*

- 16.1 In private accommodation   teachers
- 16.2 Provided by school or community   teachers
- 16.3 Provided by local or responsible authority   teachers
- 16.4 Provided by government   teachers
- 16.5 Provided by another agency   teachers

17. How many teachers do not have school houses provided by the school, community, responsible authority, or government but need to have access to this kind of housing?

*(Please write the numbers in the boxes below.)*

teachers

SOME QUESTIONS ABOUT ENROLMENT

18. What is the total enrolment of your **school** this term?  
(Please write the numbers in the boxes below.)

18.1 Boys

18.2 Girls

19. What is the total enrolment in **Grade 6** in your school?  
(Please write the number in the boxes below.)

19.1 Boys

19.2 Girls

SOME QUESTIONS ABOUT SCHOOL OPERATION

20. How many shifts operate in your school?  
(If you have only one shift, then please fill in the first line only. If you have two shifts, then please fill in the first line for the first shift and the second line for the second shift, etc.)

No. of shifts	Starting time	Finishing time	No. of pupils per shift	No. of classes per shift
1	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
2	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
3	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
4	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
5	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
6	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>

21. What was the last year your school had a full inspection?  
*(Please tick only one box.)*

- (1) There has never been a full inspection at this school.
- (2) The last full inspection year was before 1991.
- (3) 1991 was the last full inspection year.
- (4) 1992 was the last full inspection year.
- (5) 1993 was the last full inspection year.
- (6) 1994 was the last full inspection year.
- (7) 1995 was the last full inspection year.

22. In your work as a School Head, how important are each of the following activities?  
*(Please tick one box on each line.)*

		Not very important	Of some importance	Very important
22.1	Contacts with local community	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)	<input type="checkbox"/> (3)
22.2	Using records of pupils' progress	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)	<input type="checkbox"/> (3)
22.3	Administrative tasks concerning the functioning of the school	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)	<input type="checkbox"/> (3)
22.4	Discussing educational objectives with the teaching staff	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)	<input type="checkbox"/> (3)
22.5	Activities aimed at the professional development of teachers	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)	<input type="checkbox"/> (3)

23. Of the five activities listed above, select the one that you consider to be the most important.  
*(Please write its number in the box below.)*

2	2.	
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24. Which of the following occur in your school?  
 (Please tick one box on each line.)

		No	Yes
24.1	The production of a school magazine in the form of a little booklet or some sheets of paper posted on the wall	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
24.2	A public speaking day when pupils read speeches to parents that they themselves have written	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
24.3	An "open-door policy" for parents to visit the school head or teachers <b>at any time</b> either by appointment or not by appointment	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
24.4	Formal debates or debating contests	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)

25. To what extent is each of the following a problem in your school?  
 (Please tick one box on each line.)

		Not a problem at all	A minor problem	A major problem
25.1	Teacher absenteeism	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)	<input type="checkbox"/> (3)
25.2	Teacher laziness	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)	<input type="checkbox"/> (3)
25.3	Pupil absenteeism	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)	<input type="checkbox"/> (3)
25.4	Sexual harassment (teacher/pupil, teacher/teacher or pupil/pupil)	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)	<input type="checkbox"/> (3)

26. How many official school days did you lose (i.e., no teaching took place) in the last school year as a result of such things as late start of term, organization of examinations, school festivals, national celebrations, etc.?  
 (Please write '0' if there were no days lost.)

days

SOME QUESTIONS ABOUT SCHOOL FACILITIES

27. How many permanent classrooms, temporary classrooms, and open-air teaching areas does your school have?  
(Please write the numbers in the boxes below.)

Note: **Permanent** classrooms are completed classrooms that have been built using materials in compliance with approved specifications; **temporary** classrooms include, for example, temporary/thatch roof, roof only, walls only; **open-air** teaching areas are areas that have no floors, walls, or roofs and are usually located under a tree.

- 27.1 **Permanent** classrooms
- 27.2 **Temporary** classrooms
- 27.3 **Open-air** teaching areas

28. What is the total inside area (in square metres) of all permanent and temporary classrooms in your school?  
(Do not include the open-air teaching areas.)  
(Please write the numbers in the boxes below.)

- 28.1 Permanent  square metres
- 28.2 Temporary  square metres

29. What is the general condition of your school buildings?  
(Please tick only one box.)

- (1) The school needs complete rebuilding.
- (2) Some classrooms need major repairs.
- (3) Most or all classrooms need minor repairs.
- (4) Some classrooms need minor repairs.
- (5) In good condition

30. How many squat holes or toilets does your school have?  
*(Please write the numbers in the boxes below.)*

30.1 Boys squat holes or toilets

30.2 Girls squat holes or toilets

31. Which of the following does your school have?  
*(Please tick one box for each line.)*

	No	Yes
31.01 School library	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
31.02 School or community hall	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
31.03 Teacher/staff room	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
31.04 Separate office for school head	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
31.05 Separate office for school secretary	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
31.06 Store room	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
31.07 First aid kit	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
31.08 Sports area	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
31.09 Playground	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
31.10 Piped water	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
31.11 Other sources of water (e.g., well or borehole)	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
31.12 Electricity	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
31.13 Telephone	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
31.14 Fax machine	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
31.15 School garden	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
31.16 Typewriter	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
31.17 Duplicator	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)

31.18 Radio

No Yes

31.19 Tape recorder

  
(1)  
(2)

31.20 Overhead projector

  
(1)  
(2)

31.21 TV set

  
(1)  
(2)

31.22 Film projector

  
(1)  
(2)

31.23 Video cassette recorder (VCR)

  
(1)  
(2)

31.24 Photocopier

  
(1)  
(2)

31.25 Computer

  
(1)  
(2)

31.26 Canteen/cafeteria/tuckshop/  
feeding/eating facilities

  
(1)  
(2)

32. How many books are there in your school library?  
(Do not count magazines or newspapers.)  
(Please write '0' if you do not have a school library.)

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 books

33. How many books were added to your school library last year?  
(Please write '0' if you do not have a school library or if no books were added.)

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 books

34. Do pupils borrow books from the school library to take them to their homes?  
(Please tick only one box.)

(1) We have no school library.

(2) No

(3) Yes