

HELLO. MY NAME IS [NAME] AND I AM WORKING WITH THE RESEARCH INSTITUTE CIERPA. WE ARE WORKING ON A STUDY CONCERNED WITH EDUCATION IN YOUR COMMUNITY. THE STUDY IS FUNDED BY THE MILLENNIUM CHALLENGE CORPORATION, AN AMERICAN FOREIGN AID AGENCY, AND IS BEING CARRIED OUT BY MATHEMATICA POLICY RESEARCH. I WOULD LIKE TO TALK TO YOU ABOUT YOUR HOUSEHOLD. THE INTERVIEW WILL TAKE SOME TIME. ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL AND THIS INFORMATION WILL NOT BE RELEASED IN ANY WAY THAT WOULD ALLOW IDENTIFICATION OF YOUR HOUSEHOLD OR YOUR FAMILY'S ANSWERS. THIS INFORMATION WILL BE USED FOR EVALUATION PURPOSES ONLY, AND ONCE THE STUDY IS COMPLETED DATA FROM THE STUDY THAT DOES NOT IDENTIFY YOU PERSONALLY WILL BE MADE PUBLICLY AVAILABLE TO ENABLE ADDITIONAL ANALYSES. YOUR PARTICIPATION IS VOLUNTARY AND YOU MAY CHOOSE NOT TO ANSWER ANY OR ALL QUESTIONS FOR ANY REASON. IN OTHER WORDS, YOU HAVE THE ALTERNATIVE TO NOT PARTICIPATE. THERE ARE NO RISKS AND NO DIRECT BENEFITS TO YOU IN PARTICIPATING IN THIS STUDY. YOU MAY CONTACT M. KOURGUENI, THE DIRECTOR OF CIERPA, AT 96.59.80.79, IF YOU HAVE QUESTIONS, CONCERNS OR COMPLAINTS ABOUT THE STUDY OR YOUR RIGHTS AS PARTICIPANTS. IF YOU HAVE ANY QUESTIONS FOR ME, PLEASE FEEL FREE TO ASK AT ANY TIME. DURING THIS TIME I WOULD LIKE TO SPEAK WITH THE HOUSEHOLD HEAD AND ALL MOTHERS OR OTHERS WHO TAKE CARE OF CHILDREN IN THE HOUSEHOLD.

HOUSEHOLD CHARACTERISTICS		HC
HC9. SEX OF HEAD OF HOUSEHOLD:	MALE1 FEMALE2	<input type="checkbox"/>
HC10. AGE OF HEAD OF HOUSEHOLD: (DON'T KNOW, 98)		<input type="checkbox"/>
HC11. HIGHEST LEVEL OF EDUCATION OF HEAD OF HOUSEHOLD: MARK THE HIGHEST LEVEL, UP TO TWO RESPONSES ARE POSSIBLE		
NONE 00	KORANIC SCHOOL..... 05	A. <input type="checkbox"/>
PRE-SCHOOL..... 01	MADRASA..... 06	B. <input type="checkbox"/>
PRIMARY 02	ADULT LITERACY 07	
SECONDARY 03	DON'T KNOW 98	
HIGHER..... 04		
HC12. TOTAL NUMBER OF HOUSEHOLD MEMBERS:		<input type="checkbox"/>
HC13. TOTAL NUMBER OF CHILDREN UNDER 18 YEARS OLD IN HOUSEHOLD:		<input type="checkbox"/>
HC15. WHAT NATIONAL LANGUAGES DOES THE HEAD OF THIS HOUSEHOLD SPEAK? MARK ALL THAT APPLY, UP TO THREE	HAOUSSA 01 ZARMA 02 TAMASHEQ 03 FULFULDE 04 KANURI..... 05 TOUBOU..... 06 ARABE 07 BOUDOUMA 08 GOURMANTCHE 09 TASSAWAK..... 10 OTHER LANGUAGE (SPECIFY) 96 _____	A. <input type="checkbox"/> B. <input type="checkbox"/> C. <input type="checkbox"/>
HC16. DOES THE HEAD OF THIS HOUSEHOLD SPEAK FRENCH?	YES 01 NO..... 02 DON'T KNOW 98	<input type="checkbox"/>
HC17. CAN THE HEAD OF THE HOUSEHOLD READ A SIMPLE PHRASE IN ANY LANGUAGE?	YES 01 NO..... 02 DON'T KNOW 98	<input type="checkbox"/>

HOUSEHOLD CHARACTERISTICS		HC
HC18. MAIN MATERIAL OF THE DWELLING FLOOR?	NATURAL MATERIAL (EARTH, SAND) 01 RUDIMENTARY MATERIAL (WOOD PLANKS)..... 02 FINISHED MATERIAL (VINYL, ASPHALT, CERAMIC, CEMENT, TILE) 03 OTHER (SPECIFY) 96 _____	_ _
HC19. MAIN MATERIAL OF THE ROOF?	NATURAL MATERIAL (NO ROOF, STRAW) 01 RUDIMENTARY MATERIAL (RUSTIC MAT, WOOD PLANKS) 02 FINISHED MATERIAL (METAL, WOOD, CEMENT, SHINGLES)..... 03 OTHER (SPECIFY) 96 _____	_ _
HC20. MAIN MATERIAL OF THE DWELLING WALLS?	NATURAL MATERIAL (EARTH, SAND)..... 01 RUDIMENTARY MATERIAL (WOOD PLANKS, PALM, STEM/STALK, STRAW) 02 FINISHED MATERIAL (ASPHALT, TILES, CEMENT) 03 WITHOUT WALLS 04 OTHER (SPECIFY) 96 _____	_ _
HC21. DO ANY MEMBERS OF YOUR HOUSEHOLD OWN ANY OF THE FOLLOWING FUNCTIONING GOODS?		
A. RADIO	YES 1 NO 2	_
B. TELEPHONE /CELL PHONE	YES 1 NO 2	_
C. WATCH	YES 1 NO 2	_
D. BICYCLE	YES 1 NO 2	_
E. ANIMAL DRAWN-CART	YES 1 NO 2	_
F. CATTLE	YES 1 NO 2	_
G. CAMELS	YES 1 NO 2	_
HC22A. IF HC21B =1, HOW MANY CELL PHONES ARE OWNED BY MEMBERS OF THE HOUSEHOLD?	NUMBER OF CELL PHONES	_ _

HOUSEHOLD CHARACTERISTICS		HC
<p>HC22B. IF HC21B =1, WHICH MEMBERS OF THE HOUSEHOLD HAVE THESE CELL PHONES?</p> <p>MARK ALL APPLICABLE RELATIONS TO THE HEAD OF THE HOUSEHOLD</p>	<p>HEAD.....01 WIFE OR HUSBAND02 SON OR DAUGHTER03 GRANDCHILD.....04 MOTHER/FATHER05 BROTHER/SISTER06 UNCLE/AUNT07 NIECE/NEPHEW08 ADOPTED/FOSTER/STEP CHILD09 NOT RELATED 10 OTHER RELATIONS (SPECIFY) 96 _____</p>	<p>A. __ __ B. __ __ C. __ __ </p>
<p>HC22C. IF HC21B =1, WHICH MEMBERS OF THE HOUSEHOLD ARE ALLOWED TO USE THESE CELL PHONES?</p> <p>MARK ALL APPLICABLE RELATIONS TO THE HEAD OF THE HOUSEHOLD</p>	<p>HEAD.....01 WIFE OR HUSBAND02 SON OR DAUGHTER03 GRANDCHILD.....04 MOTHER/FATHER05 BROTHER/SISTER06 UNCLE/AUNT07 NIECE/NEPHEW08 ADOPTED/FOSTER/STEP CHILD09 NOT RELATED 10 OTHER RELATIONS (SPECIFY) 96 _____</p>	<p>A. __ __ B. __ __ C. __ __ </p>
<p>HC23. WHAT IS THE MAIN SOURCE OF DRINKING WATER FOR MEMBERS OF YOUR HOUSEHOLD DURING THE RAINY SEASON?</p>	<p>PIPED WATER.....01 TUBE WELL OR BOREHOLE02 COVERED WELL.....03 TRADITIONAL WELL.....04 TANKER TRUCK05 SURFACE WATER (RAIN, RIVER, STREAM, ETC)06 BOTTLED WATER07 OTHER (SPECIFY)96 _____</p>	<p> __ __ </p>
<p>HC24. WHAT IS THE PRINCIPAL TYPE OF TOILET THAT IS USED BY YOUR HOUSEHOLD?</p>	<p>MODERN TOILET01 IMPROVED LATRINE.....02 TRADITIONAL LATRINE03 BUSH/IN NATURE04 OTHER (SPECIFY)96 _____</p>	<p> __ __ </p>
<p>HC25. HAVE ANY ADULT MEMBERS OF THIS HOUSEHOLD PARTICIPATED IN LITERACY TRAINING OF ANY KIND?</p>	<p>YES 1 NO2</p>	<p> __ 2⇒HC29</p>
<p>HC26. HOW MANY ADULT MEMBERS PARTICIPATED, BY GENDER?</p>	<p>A. MALES B. FEMALES</p>	<p> __ __ __ __ </p>
<p>HC27. DO ANY ADULT MEMBERS CURRENTLY PARTICIPATE?</p>	<p>YES 1 NO2</p>	<p> __ 1⇒HC29</p>

HOUSEHOLD CHARACTERISTICS		HC
HC28. HAVE ANY ADULT MEMBERS PARTICIPATED DURING THE PREVIOUS 1 YEAR?	YES 1 NO 2	<input type="checkbox"/>
HC29. HAVE ANY MEMBERS OF THIS HOUSEHOLD PARTICIPATED IN ANY COMMUNITY EVENTS RELATED TO LITERACY AND READING IN THE PREVIOUS 1 YEAR?	YES 1 NO 2	<input type="checkbox"/>
HC30. ON AVERAGE, HOW MANY MEALS PER DAY DO YOU HAVE IN YOUR HOUSEHOLD?	NUMBER OF MEALS	<input type="checkbox"/>
HC31. IN THE PREVIOUS 7 DAYS, HAVE YOU OR ANY MEMBER OF YOUR HOUSEHOLD GONE TO BED HUNGRY BECAUSE THERE WAS NOT ENOUGH FOOD AVAILABLE?	YES 1 NO 2	<input type="checkbox"/>
HC32. HOW SATISFIED ARE YOU WITH THE INFRASTRUCTURE IN THE PRIMARY SCHOOL IN YOUR VILLAGE? <i>IF THERE IS MORE THAN 1 SCHOOL, THINK OF THE SCHOOL THAT THE LARGEST NUMBER OF YOUR CHILDREN ATTEND.</i>	UNSATISFIED 1 A LITTLE SATISFIED 2 SOMEWHAT SATISFIED 3 SATISFIED 4	<input type="checkbox"/>
HC33. HOW SATISFIED ARE YOU WITH THE TEACHERS IN THE PRIMARY SCHOOL IN YOUR VILLAGE? <i>IF THERE IS MORE THAN 1 SCHOOL, THINK OF THE SCHOOL THAT THE LARGEST NUMBER OF YOUR CHILDREN ATTEND.</i>	UNSATISFIED 1 A LITTLE SATISFIED 2 SOMEWHAT SATISFIED 3 SATISFIED 4	<input type="checkbox"/>
HC34. DOES SOMEONE (ADULT) IN YOUR HOUSEHOLD PARTICIPATE IN ACTIVITIES WITH THE COGES/CGDES, AME OR APE DURING THE PREVIOUS YEAR?	YES 01 NO 02 DON'T KNOW 98	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
HC35. DOES THE PRIMARY SCHOOL OFFER SEPARATE BATHROOMS FOR BOYS & GIRLS?	YES 01 NO 02 DON'T KNOW 98	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
HC36. DOES THE PRIMARY SCHOOL OFFER A SCHOOL FEEDING PROGRAM?	YES 01 NO 02 DON'T KNOW 98	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 2⇒HC39
HC37. DOES THE PRIMARY SCHOOL OFFER DRY RATIONS?	YES 01 NO 02 DON'T KNOW 98	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 2⇒HC39
HC38. IF YES, ARE THE DRY RATIONS FOR GIRLS ONLY?	YES 01 NO 02 DON'T KNOW 98	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
HC39. DOES THE PRIMARY SCHOOL OFFER TEXTBOOKS?	YES 01 NO 02 DON'T KNOW 98	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
HC40. AT WHAT AGE DO YOU EXPECT CHILDREN TO BE CAPABLE OF READING?	AGE DON'T KNOW 98	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

HOUSEHOLD LISTING FORM

Village ID:

Household Number

HL

FIRST, PLEASE TELL ME THE NAME OF EACH CHILD WHO USUALLY LIVES HERE BETWEEN THE AGES OF 5 AND 14. *List all household members between 5 and 14 years old in HL2, their relationship to the household head (HL5), their sex (HL3), and their age (HL4). Then ask:* ARE THERE ANY OTHER CHILDREN BETWEEN THE AGE OF 5 AND 14 WHO LIVE HERE, EVEN IF THEY ARE NOT MEMBERS OF YOUR FAMILY, DO NOT HAVE PARENTS LIVING IN THIS HOUSEHOLD, OR ARE NOT AT HOME NOW? (INCLUDING CHILDREN IN SCHOOL OR AT WORK). *If yes, complete listing. Add a continuation sheet if there are more than 10 children in the household between the ages of 5 and 14. Tick here if continuation sheet used*
The ID code of the child noted in HLI has to be constant on all following pages.

HL1. Child ID	HL2. CHILD'S NAME	HL3. IS (NAME) MALE FOR FEMALE? 1 MALE 2 FEMALE	HL4A. HOW OLD IS (NAME)? RECORD IN COMPLETED YEARS 98 DON'T KNOW	HL4B. DO YOU HAVE (NAME'S) LEGAL BIRTH DOCUMENTS? 1 Yes 2 No	HL5. WHAT IS THE RELATIONSHIP OF (NAME) TO THE HEAD OF THE HOUSEHOLD? 01 SON OR DAUGHTER 02 GRANDSON OR GRANDDAUGHTER 03 BROTHER OR SISTER 04 NIECE OR NEPHEW 05 ADOPTED/FOSTERED/ STEPCHILD 06 NO RELATION 96 OTHER (SPECIFY) 98 DON'T KNOW	HL6. WHAT IS (NAME)'S MOTHER TONGUE? 01 HAOUSSA 02 ZARMA 03 TAMASHEQ 04 FULFULDE 05 KANURI 06 TOUBOU 07 ARABE 08 BOUDOUMA 09 GOURMANTCHE 10 DJOULA 11 FRENCH 96 OTHER (SPECIFY)	HL7. AT ANY TIME DURING THE PAST YEAR, DID (NAME) DO ANY KIND OF WORK FOR SOMEONE WHO IS NOT A MEMBER OF THIS HOUSEHOLD? IF YES: FOR PAY IN CASH/ IN KIND OR NON-PAID? 1 YES, PAID (CASH OR IN KIND) 2 YES, NON-PAID 3 No	HL8. WHAT IS THE HIGHEST LEVEL OF SCHOOL (NAME) ATTENDED? LEVEL: 00 NO SCHOOL 01 PRESCHOOL 02 PRIMARY 03 SECONDARY 04 NON FORMAL 98 DON'T KNOW 00 OR 04 OR 98 ⇒ HL10	HL9. WHAT IS THE HIGHEST GRADE (NAME) COMPLETED AT THIS LEVEL? GRADE: 1 PRESCHOOL 2 CI 3 CP 4 CE1 5 CE2 6 CM1 7 CM2 8 6TH 9 ABOVE 6TH	HL10. WHAT IS THE HIGHEST LEVEL YOU THINK (NAME) WILL COMPLETE? LEVEL: 00 NO SCHOOL 01 PRESCHOOL 02 PRIMARY 03 SECONDARY 04 ADVANCED DEGREE 98 DON'T KNOW	HL11. WHAT IS THE HIGHEST LEVEL OF SCHOOL YOU WOULD LIKE (NAME) TO ATTEND? LEVEL: 00 NO SCHOOL 01 PRESCHOOL 02 PRIMARY 03 SECONDARY 04 ADVANCED DEGREE 98 DON'T KNOW
ID	NAME	SEX	AGE	BIRTH CERTIFICATE	RELATION	MOTHER TONGUE	WORK	LEVEL	GRADE	LEVEL	LEVEL
01		<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"/>
02		<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"/>
03		<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"/>
04		<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"/>
05		<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"/>
06		<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"/>
07		<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"/>
08		<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"/>
09		<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"/>
10		<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"/>

To be administered for every child in the household age 5 through 14 years

HL1. CHILD ID	HL2. CHILD'S NAME	HL12. DURING THE (2011-2012) SCHOOL YEAR, HAS (NAME) ATTENDED SCHOOL OR PRESCHOOL AT ANY TIME? 01 YES 02 NO ⇒ HL15 98 DON'T KNOW ⇒ HL15	HL13. WHAT GRADE DID (NAME) ATTEND DURING THE 2011/2012 SCHOOL YEAR? GRADE: 1 PRESCHOOL 2 CI 3 CP 4 CE1 5 CE2 6 CM1 7 CM2 8 6IEME 9 5IEME OU PLUS	HL14. DID (NAME) COMPLETE THE SCHOOL YEAR? 01 YES 02 NO 98 DON'T KNOW	HL15. DURING THE (2012-2013) SCHOOL YEAR, HAS (NAME) ATTENDED SCHOOL OR PRESCHOOL AT ANY TIME? 01 YES 02 NO ⇒ HL18 98 DON'T KNOW ⇒ HL18	HL16. WHAT GRADE DID (NAME) ATTEND DURING THE 2012/2013 SCHOOL YEAR? GRADE: 1 PRESCHOOL 2 CI 3 CP 4 CE1 5 CE2 6 CM1 7 CM2 8 6IEME 9 5IEME OU PLUS	HL17. DID (NAME) COMPLETE THE SCHOOL YEAR? 01 YES 02 NO 98 DON'T KNOW GO TO HL19	HL18. IF NO IN HL15: WHAT IS THE PRIMARY REASON (NAME) DID NOT ENROLL IN SCHOOL IN 2012-2013? 01 NO SCHOOL IN THE VILLAGE 02 SCHOOL FEES 03 CHILD TOO YOUNG 04 SCHOOL TOO FAR 05 WORK FOR INCOME 06 HOUSEHOLD WORK 07 TAKING CARE OF SIBLINGS 08 NO SEPARATE TOILETS 09 CHILD TOO OLD 10 AVOID DEBAUCHERY 11 EARLY MARRIAGE 12 FAMILY REFUSED 13 NO CERTIFICATE OF BIRTH 14 VIOLENCE 15 CHILD HAS HEALTH PROBLEMS 16 CHILD DISABLED 17 CHILD REFUSED 18 EXPELLED/FAILED 96 OTHER (SPECIFY) 98 DON'T KNOW	HL19. DO YOU PLAN TO ENROLL (NAME) IN SCHOOL DURING THE 2013/2014 SCHOOL YEAR? 01 YES → ED1 02 NO 98 DON'T KNOW	HL20. IF NO IN HL19: WHAT IS THE PRIMARY REASON YOU DO NOT PLAN TO ENROLL (NAME) IN SCHOOL IN 2013-2014? 01 NO SCHOOL IN THE VILLAGE 02 SCHOOL FEES 03 CHILD TOO YOUNG 04 SCHOOL TOO FAR 05 WORK FOR INCOME 06 HOUSEHOLD WORK 07 TAKING CARE OF SIBLINGS 08 NO SEPARATE TOILETS 09 CHILD TOO OLD 10 AVOID DEBAUCHERY 11 EARLY MARRIAGE 12 FAMILY REFUSED 13 NO CERTIFICATE OF BIRTH 14 VIOLENCE 15 CHILD HAS HEALTH PROBLEMS 16 CHILD DISABLED 17 CHILD REFUSED 18 EXPELLED/FAILED 96 OTHER (SPECIFY) 98 DON'T KNOW
ID	NAME	ENROLLMENT 2011/2012	GRADE 2011/2012	COMPLETED 2011/2012	ENROLLMENT 2012/2013	GRADE 2012/2013	COMPLETED 2012/2013	REASON NOT ENROLLED 2012/2013	ENROLLMENT 2013/2014	REASON NOT ENROLLED
01		<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"/>
02		<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"/>
03		<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"/>
04		<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"/>
05		<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"/>
06		<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"/>
07		<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"/>
08		<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"/>
09		<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"/>
10		<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"/>

MODULE EDUCATION

Village ID:

HOUSEHOLD NUMBER

ED

TO BE ADMINISTERED FOR EVERY CHILD IN THE HOUSEHOLD AGE 5 THROUGH 14 YEARS THAT WENT TO SCHOOL DURING THE 2012-2013 SCHOOL YEAR (HL15=1)

HL1. CHILD ID	HL2. CHILD'S NAME HL15=1	ED1. DID (NAME) HAVE ACCESS TO A COMPLETE SET OF TEXTBOOKS FOR HIS OR HER USE? 1 YES 2 NO	ED2. WHAT IS THE NAME OF THE SCHOOL THAT (NAME) ATTENDED IN 2012/2013 AND IN WHICH VILLAGE IS IT LOCATED? WRITE THE APPROPRIATE SCHOOL AND VILLAGE CODE FROM THE LIST. IF SCHOOL IS NOT LISTED, RECORD 888 AND WRITE FULL NAME OF SCHOOL AND THE VILLAGE ID. IF VILLAGE IS NOT LISTED, WRITE 888 IN VILLAGE ID AND RECORD VILLAGE NAME.		ED3. HOW LONG DOES IT TAKE (NAME) TO TRAVEL TO HIS/HER SCHOOL? 01 LESS THAN 10 MINUTES 02 10 – 20 MINUTES 03 20 – 30 MINUTES 04 MORE THAN 30 MINUTES 98 DON'T KNOW	ED4. OF THE FOLLOWING FACTORS, (READ THE OPTIONS) WHAT IS THE MOST IMPORTANT TO YOU FOR SENDING (NAME) TO THIS SCHOOL? 01 DISTANCE TO SCHOOL 02 TEXTBOOKS 03 SCHOOL CANTEEN 04 DRY RATIONS 05 SEPARATE BATHROOMS FOR BOYS AND GIRLS 06 READING MATERIALS IN LOCALE LANGUAGE	ED5. OF THE FOLLOWING FACTORS, (READ THE OPTIONS) WHAT IS THE SECOND MOST IMPORTANT REASON TO YOU FOR SENDING (NAME) TO THIS SCHOOL? 01 DISTANCE TO SCHOOL 02 TEXTBOOKS 03 SCHOOL CANTEEN 04 DRY RATIONS 05 SEPARATE BATHROOMS FOR BOYS AND GIRLS 06 READING MATERIALS IN LOCALE LANGUAGE
ID	NAME	MANUALS	ID SCHOOL	ID VILLAGE	ONE WAY	PRINCIPAL REASON	SECONDARY REASON
01		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
03		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
04		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
05		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
06		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
07		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
08		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
09		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

MODULE EDUCATION **Village ID:** **HOUSEHOLD NUMBER** **ED**

To BE ADMINISTERED FOR EVERY CHILD IN THE HOUSEHOLD AGE 5 THROUGH 14 YEARS THAT WENT TO SCHOOL DURING THE 2012-2013 SCHOOL YEAR (HL18=1)

HL1. CHILD ID	HL2. CHILD'S NAME	ED6. WAS THE CHILD EVER ABSENT FOR MORE THAN 2 CONSECUTIVE WEEKS DURING THE PAST SCHOOL YEAR? 01 YES 02 NO 98 DON'T KNOW	ED9. HOW MANY DAYS DID (NAME) MISS DURING THE LAST MONTH THAT SCHOOL WAS OPEN? 98 DON'T KNOW IF 00 OR 98, GO TO ED11	ED10. WHAT WAS THE PRINCIPAL REASON FOR (NAME) MISSING SCHOOL? 01 SICK 02 FUNERAL 03 OTHER CEREMONY 04 WORK FOR INCOME 05 HOUSEHOLD CHORES 06 FINANCIAL REASONS 07 TAKING CARE OF SIBLINGS 08 CHILD REFUSED 09 TEACHER ABSENT 10 SCHOOL CLOSED 11 TRAVEL 12 VIOLENCE 13 WORKING IN THE FIELD/PASTURAGE 96 OTHER (SPECIFY)	ED11. HOW OLD WAS (NAME) WHEN HE/SHE FIRST ENTERED PRIMARY SCHOOL? 94 NOT APPLICABLE (IF CHILD IS CURRENTLY IN PRESCHOOL)	ED13. DOES (NAME) HAVE A MENTOR? 01 YES 02 NO 98 DON'T KNOW	ED14. HAS (NAME) RECEIVED DE-WORMING TREATMENT IN THE PREVIOUS 12 MONTHS? 01 YES 02 NO 98 DON'T KNOW
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ID	NAME	PRESENCE	Nr OF DAYS	REASON	AGE	MENTOR	DEWORMING
01		<input type="text"/> <input type="text"/> <input type="text"/>					
02		<input type="text"/> <input type="text"/> <input type="text"/>					
03		<input type="text"/> <input type="text"/> <input type="text"/>					
04		<input type="text"/> <input type="text"/> <input type="text"/>					
05		<input type="text"/> <input type="text"/> <input type="text"/>					
06		<input type="text"/> <input type="text"/> <input type="text"/>					
07		<input type="text"/> <input type="text"/> <input type="text"/>					
08		<input type="text"/> <input type="text"/> <input type="text"/>					
09		<input type="text"/> <input type="text"/> <input type="text"/>					
10		<input type="text"/> <input type="text"/> <input type="text"/>					

OPINIONS OF CHILDREN

Village ID:

HOUSEHOLD NUMBER

OE

To be administered for every child in the household age 5 through 14 years, even those that have never been currently enrolled in school. Before speaking with each child, obtain consent to speak to the child from the household head or the child’s parent. “I am [name]. I work with parents and children. I am trying to learn more about the daily life of children like you. I would like to ask you a few questions.” Pose some simple questions to the child to build a rapport. Make them feel comfortable. Use the language most comfortable to the child, his/her mother tongue, and note it in OE1. “What is your name? What is the name of your father? What is the name of your mother?” If the child refuses to speak with you, note the refusal and move to the next child. If the child speaks with you, say: “Now I would like to ask you a few questions about school and then give you a short test in [local language] and French. I will ask you a set of questions. You should give the answer that fits best. If you don’t understand the question, I will read the question again. You can ask me anytime to explain a question. You can choose not to answer, or you can tell me if a question is hard for you and we will skip that question. If you like, you can end the interview at any time. Do you understand?” If the child understands, continue. If the child does not understand, ask what the child does not understand and clarify the issue for the child. If the child agrees, begin with a few questions about schooling in OE2-OE6 and then move to the first reading test. Record the result code of the child.

HL1. CHILD ID	HL2. CHILD’S NAME	RESULT CODE CHILD AFTER OBTAINING CONSENT, RECORD THE RESULT CODE	OE1. WRITE THE LANGUAGE USED TO POSE QUESTION TO THE CHILD	OE2. HOW OLD ARE YOU?	OE3. WERE YOU ENROLLED IN SCHOOL DURING THE LAST SCHOOL YEAR?	OE4. DID YOU EXPERIENCE VIOLENCE IN SCHOOL?	OE5. DID YOUR TEACHER CALL MORE ON BOYS OR ON GIRLS?	OE6. DO YOU WANT TO GO TO SCHOOL?
	COPY FROM HL2	1 INTERVIEW COMPLETED IN THE HOME 2 INTERVIEW COMPLETED AT THE SCHOOL 3 PARENT REFUSED 4 CHILD REFUSED 5 CHILD NOT AVAILABLE 6 OTHER (SPECIFY)	01 FRENCH 02 HAOUSSA 03 ZARMA 04 KANURI 05 TAMASHEQ 06 FULFULDE 96 OTHER LOCALE LANGUAGE (SPECIFY)	98 DON’T KNOW	1 YES 2 NO → OE6	1 YES 2 NO	1 BOYS 2 GIRLS 3 SAME	1 YES 2 NO
ID	NAME	RESULT	LANGUAGE	AGE	ENROLLED	VIOLENCE	GENDER	SCHOOL
01		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
03		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
04		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
05		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
06		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
07		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
08		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
09		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

LOCAL LANGUAGE

VILLAGE ID: |__|__|__|

HUSEHOLD NUMBER |__|__|__|

Based on the local language chosen for the main school, the reading tests begin either in Haoussa, Zarma, Kanuri, Tamasheq, or Fulfulde, and the children are only given one local language test. All the children in the village will take the same language test. After the local language test (Haoussa, Zarma, Kanuri, Tamasheq or Fulfulde), proceed to the French test and then the Math test, which will be administered to all children. Note that no matter what test is given, explain the instructions to the child in the language that they understand best.

The instructions for all the reading tests in local languages and French are the same.

LANGUAGE AND TEST CODE IN LOCAL LANGUAGE: |__| |_____

HAOUSSA.....1

ZARMA.....2

KANURI.....3

TAMASHEQ.....4

FULFULDE5

Use the sheets for the local language noted above.

After finishing the local language tests, continue with the French test.

FRENCH	VILLAGE ID: <input type="text"/>	HOUSEHOLD NUMBER <input type="text"/>	FA1
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Subtask 1: Receptive Oral Language

This is not a timed exercise and is administered orally.

Interviewer states: “We are going to play a game, ok? I am going to give you instructions, and we can see if you can follow what I say!”

Example 1: Interviewer states: “Point to your nose”. The interviewer then points to his nose, and encourages the child to do the same. If the child points correctly, the interviewer states “Bravo that is correct!” If the child does not point, the interviewer repeats the instructions and asks, “Can you point to your nose?”

Example 2: Interviewer states: “Point to your head”. The interviewer does not point to his head, but encourages child to point.

Interviewer states: “Do you understand?” If the child does not understand, the interviewer explains the instructions again and repeats the examples. If the child understands, the interviewer starts the test. If child makes 5 consecutive errors, continue to the next subtask. If child does not respond, mark “No Response”, and continue to the next subtask.

Ask each question in French and note the response in the questionnaire. **RESPONSE CODES: 1= CORRECT, 2= INCORRECT, 3= NO RESPONSE**

HL1.	HL2. CHILD’S NAME	FA11. MONTRE TON OREILLE	FA12. MONTRE TA BOUCHE	FA13. LEVE TA MAIN	FA14. LEVE UN PIED	FA15. TAPE DANS TES MAINS	FA16. SAUTE!	FA17. LEVE LES BRAS	FA18. REGARDE EN ARRIERE	FA19. ASSIEDS- TOI	FA110. METS CET OBJET DEVANT TOI	No RESPONSE
ID	NAME	TOUCH YOUR EAR	TOUCH YOUR MOUTH	RAISE YOUR HAND	RAISE YOUR FOOT	CLAP YOUR HANDS	JUMP !	RAISE YOUR ARMS	LOOK BEHIND	SIT DOWN	PUT THE OBJECT IN FRONT OF YOU	NO RESPONSE
01		<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"/>
02		<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"/>
03		<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"/>
04		<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"/>
05		<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"/>
06		<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"/>
07		<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"/>
08		<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"/>
09		<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"/>
10		<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"/>

Before continuing, say “Good effort! Let’s continue to the next section!”

Subtask 2: Expressive Oral Language

This is not a timed exercise and is administered orally.
 Interviewer states: "Now I am going to show you things, and you tell me what they are called."
 Example 1: Interviewer points to his eye and states: "What is this?" Then the interviewer states: "You say 'it is an eye'".
 Example 2: Interviewer points to his ear and states: "What is this?" Then the interviewer encourages the child to say 'ear'.
 Interviewer states: "Do you understand?" If the child does not understand, the interviewer explains the instructions again and repeats the examples. If the child understands, the interviewer starts the test. If child makes 5 consecutive errors, continue to the next subtask. If child does not respond, mark "No Response", and continue to the next subtask.

Ask each question in French and note the response in the questionnaire. **RESPONSE CODES: 1= CORRECT, 2= INCORRECT, 3=NO RESPONSE**

HL1.	HL2. CHILD'S NAME	FA21. NEZ	FA22. TETE	FA23. PIED	FA24. DOIGT	FA25. COU	FA26. DENTS	FA27. BOUCHE/ LEVRES	FA28. GENOU	FA29. PANTALON/ PAGNE	FA210. CHAUSSURE	No RESPONSE
ID	NAME	NOSE	HEAD	FOOT	FINGER	NECK	TEETH	MOUTH/LIPS	KNEE	PANTS/SKIRT	SHOE	NO RESPONSE
01		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>						
02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>						
03		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>						
04		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>						
05		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>						
06		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>						
07		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>						
08		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>						
09		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>						
10		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>						

Before continuing, say "Good effort! Let's continue to the next section!"

Subtask 3: Listening Comprehension

This is not a timed exercise and this is administered orally only.
 Interviewer states “Now, I am going to read to you a story aloud one time. Afterwards, I will ask you some questions about the story. Listen carefully, and after you will answer the questions the best you can. Okay? Do you understand what are you supposed to do? Let’s begin! Listen carefully.”
 The interviewer reads aloud the short story, ONE TIME, slowly, (about 1 word per second), in French.
 After reading the text, ask the child each comprehension question and note the response. If the child does not give any response after 10 seconds, repeat the question, and give the child another 5 seconds to respond. If the child still does not respond, go on to the next question.

TEXT:	HL1. ID	HL2. CHILD'S NAME	FA31. OU EST TOMBEE LA PETITE POULE ?		FA32. DE QUELLE COULEUR EST L'AGNEAU ?		FA33. QUEL OBJET IMPORTANT LA PETITE POULE A VU?		FA34. POURQUOI L'AGNEAU VIENT AU SECOURS DE LA PETITE POULE?		FA35. QUAND EST-CE QUE LES DEUX AMIS CRIENT ?	
	ID	NAME	A. LA MARE	B. RESPONSE LANGUAGE	A. NOIR	B. RESPONSE LANGUAGE	A. LE TRONC D'ARBRE	B. RESPONSE LANGUAGE	A. IL EST TOMBEE	B. RESPONSE LANGUAGE	A. APRES GRIMPER	B. RESPONSE LANGUAGE
LA PETITE POULE BLANCHE EST TOMBEE DANS LA MARE. « AIDE-MOI ! » ELLE CRIE. UN AGNEAU NOIR VIENT A SON SECOURS. MAIS IL TOMBE LUI AUSSI DANS LA MARE. « QUE FAIRE ? » DEMANDE-T-IL. LA POULE DIT « REGARDE CE TRONC D'ARBRE QUI FLOTTE. IL PEUT NOUS SAUVER ! » LES DEUX AMIS GRIMPENT ALORS SUR LE TRONC D'ARBRE ET CRIENT, « OUF, NOUS ALLONS POUVOIR RETROUVER LA TERRE FERME ! » QUESTIONS : FA31. OU EST TOMBEE LA PETITE POULE ? FA32. DE QUELLE COULEUR EST L'AGNEAU ? FA33. QUEL OBJET IMPORTANT LA PETITE POULE A VU ? FA34. POURQUOI L'AGNEAU VIENT AU SECOURS DE LA PETITE POULE ? FA35. QUAND EST-CE QUE LES DEUX AMIS CRIENT ? RESPONSE CODE: 1=CORRECT, 2=INCORRECT, 3=NO REPONSE RESPONSE LANGUAGE: 01 FRANÇAIS, 02 HAOUSSA, 03 ZARMA, 04 KANURI, 05 TAMASHEQ, 06 FULFULDE, 96 OTHER (SPECIFY)	01		<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"/>
	02		<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"/>
	03		<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"/>
	04		<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"/>
	05		<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"/>
	06		<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"/>
	07		<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"/>
	08		<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"/>
	09		<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"/>
	10		<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"/>

Before continuing, say “Good effort! Let’s continue to the next section!”

Subtask 4: Letter identification (name or sound)

This is a timed exercise and is administered using the test booklet.

Show the test booklet to the child for subtask 4. Explain the subtask in the child’s maternal language, using the examples in the booklet. After explaining the examples, say “Ok? Do you understand? When I say “Begin”, point to each letter with your finger as you read it. Be careful to read from left to right, line by line. Do you understand what I am asking? Put your finger on the first letter. Ready? Try to read quickly and correctly. Begin.”

Start the timer when the child reads the first letter **name** or **sound**. If the child does not respond after 10 seconds, mark ‘Auto Stop’. Count self-corrections as correct. Stay quiet, except if the child hesitates on a letter for 3 seconds. In this case, point to the next letter and say “Please go on.” Mark the letter skipped as incorrect on the test sheet.

After 60 seconds say, “Stop and Thank you.” Note the total number correct. If the child read everything in less than one minute, note the exact number of seconds remaining on the timer. Otherwise, if the child has not finished the exercise, mark ‘00’ seconds.

Auto stop rule: If the child does not give a single correct response in the first 10 letters, gently tell the child to stop, and mark ‘Auto Stop’. Say “Thank you” and go on to the next subtask.

HL1.	HL2. CHILD’S NAME	FA41.	FA42.	FA43.	FA44.	FA45.	FA46.	FA47.	FA48.	FA49.	FA410.	AUTO STOP	TIME REMAINING	TOTAL CORRECT
ID	NAME	(10)	(20)	(30)	(40)	(50)	(60)	(70)	(80)	(90)	(100)	AUTO	SECONDS	TOTAL
01		_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _
02		_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _
03		_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _
04		_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _
05		_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _
06		_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _
07		_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _
08		_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _
09		_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _
10		_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _

Before continuing, say “Good effort! Let’s continue to the next section!”

Subtask 5: Word Identification

This is a timed exercise and is administered using the test booklet.

Show the test booklet to the child for subtask 5. Explain the subtask in the child’s maternal language, using the examples in the booklet. After explaining the examples, say “Ok? Do you understand what I am asking you to do? When I say “Start”, read the words from left to right, line by line. At the end of the line, continue to the next line. Try to read quickly and correctly. Ready? Begin.”

Start the timer when the child reads the first word. If the child does not respond after 10 seconds, mark ‘Auto Stop’. Count self-corrections as correct. Stay quiet, except if the child hesitates for 3 seconds. In this case, point to the next word and say “Please go on.” Mark the word as incorrect on the test sheet. After 60 seconds say, “Stop and Thank you.” Note the total number correct. If the child read everything in less than one minute, note the exact number of seconds remaining on the timer. Otherwise, if the child has not finished the exercise, mark ‘00’ seconds.

Auto stop rule: If the child does not give a single correct response in the first 5 words, gently tell the child to stop, and mark ‘Auto Stop’. Say “Thank you” and go on to the next subtask.

HL1.	HL2. CHILD'S NAME	FA51.	FA52.	FA53.	FA54.	FA55.	FA56.	FA57.	FA58.	FA59.	FA510.	AUTO STOP	TIME REMAINING	TOTAL CORRECT
ID	NAME	(5)	(10)	(15)	(20)	(25)	(30)	(35)	(40)	(45)	(50)	AUTO	SECONDS	TOTAL
01		_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _
02		_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _
03		_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _
04		_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _
05		_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _
06		_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _
07		_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _
08		_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _
09		_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _
10		_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_	_ _	_ _

Before continuing, say “Good effort! Let’s continue to the next section!”

FRENCH SUBTASK 6 & 7		VILLAGE ID: __ __ __							HOUSEHOLD NUMBER __ __ __					FA6 & FA7				
HL1.	HL2. CHILD'S NAME	SUBTASK 6- ORAL READING FLUENCY							SUBTASK 7 – READING COMPREHENSION									
		<p>Give the child 60 seconds to read as much of the text as possible. Note the number of words read correctly per each line. Show the child the test booklet.</p> <p>“Here is a story. Now I would like you to read it out loud, quickly and correctly, and afterwards, I will ask you some questions. Start here when I tell you. If you don’t know a word, continue to the next word. Ready? Start.”</p> <p>Give the child 60 seconds to read all that he can.</p> <p>Stay quiet, except when providing answers as follows: if the child hesitates for 3 seconds, point to the next word and say “Please go on.” Mark the word as incorrect on the test sheet.</p> <p>Auto stop rule: if the child cannot read correctly a single word in the first two lines, stop the test and note “auto-stop”. Say “thank you” and end the test.</p> <p>NOTE THE NUMBER OF WORDS READ CORRECTLY FOR EACH LINE. IF THE CHILD READ EVERYTHING IN LESS THAN ONE MINUTE, NOTE THE EXACT NUMBER OF SECONDS REMAINING ON THE TIMER. OTHERWISE, MARK ‘00’ SECONDS.</p>							<p>After the child has finished reading, take the card from the child and ask the first question. If the child does not give any response after 10 seconds, repeat the question, and give the child another 5 seconds to respond. If the child still does not answer, go to the next question.</p> <p>Ask only those questions that correspond to the lines of text read by the child, up to the last line the child was able to read.</p> <p>“Now I am going to ask you a few questions about the story you just read.” Pose the questions to the child, <i>in French</i>.</p> <p>A. QUI A FAIM? B. QU'EST-CE QUI N'EST PAS PRÊT ? C. Où VA ISSA? D. QU'EST-CE QUE MAMAN PREPARE ? E. POURQUOI ISSA EST-IL CONTENT?</p> <p>RESPONSE : 1=CORRECT, 2=INCORRECT, 3=NO RESPONSE LANGUAGE OF RESPONSE : 01 FRENCH, 02 HAOUSSA, 03 ZARMA, 04 KANURI, 05 TAMASHEQ, 06 FULFULDE, 96 OTHER (SPECIFY)</p>									
ID	NAME	A (8)	B (11)	C (9)	D (10)	E (10)	TIME	AUTO STOP	A1. ISSA	A2. LANGUAGE	B1. LE REPAS	B2. LANGUAGE	C1. A LA CUISINE	C2. LANGUAGE	D1. LE RIZ	D2. LANGUAGE	E1. IL MANGE LE PLAT QU'IL AIME	E2. LANGUAGE
01		_	_	_	_	_	_ _	_	_	_ _	_	_ _	_	_ _	_	_ _	_	_ _
02		_	_	_	_	_	_ _	_	_	_ _	_	_ _	_	_ _	_	_ _	_	_ _
03		_	_	_	_	_	_ _	_	_	_ _	_	_ _	_	_ _	_	_ _	_	_ _
04		_	_	_	_	_	_ _	_	_	_ _	_	_ _	_	_ _	_	_ _	_	_ _
05		_	_	_	_	_	_ _	_	_	_ _	_	_ _	_	_ _	_	_ _	_	_ _
06		_	_	_	_	_	_ _	_	_	_ _	_	_ _	_	_ _	_	_ _	_	_ _
07		_	_	_	_	_	_ _	_	_	_ _	_	_ _	_	_ _	_	_ _	_	_ _
08		_	_	_	_	_	_ _	_	_	_ _	_	_ _	_	_ _	_	_ _	_	_ _
09		_	_	_	_	_	_ _	_	_	_ _	_	_ _	_	_ _	_	_ _	_	_ _
10		_	_	_	_	_	_ _	_	_	_ _	_	_ _	_	_ _	_	_ _	_	_ _

Before continuing, say “Good effort! Let’s continue to the next section!”

MATH TEST **VILLAGE ID:** **HOUSEHOLD NUMBER** **MA**

To be administered for every child in the household age 5 through 14 years, even those are not currently enrolled in school. Pose the questions in the language that is most comfortable for the child. Do not assist the child by reading the numbers to them. If the child misses four questions in a row, stop the test. **RESPONSE CODES: 1= CORRECT; 2=INCORRECT**

HL1. CHILD ID	HL2. CHILD'S NAME	MA1 COUNT FROM 1 TO 10 ENTER HIGHEST NUMBER CORRECT MARK 00 IF NOT ABLE TO COUNT	MA2. ARE YOU ABLE TO IDENTIFY THE FOLLOWING NUMBERS? A. 3 B. 9 <i>Show Card</i> <i>Do not say the number</i>		MA3. ARE YOU ABLE TO COUNT THE FOLLOWING ITEMS? A. CANARIS B. ROOSTERS <i>Show Card</i> <i>Do not say the number</i>		MA4. OF THE NUMBERS BELOW, ARE YOU ABLE TO IDENTIFY THE GREATER NUMBER? WHICH IS LARGER? A. 7 8 B. 63 54 C. 381 279 <i>Show Card</i> <i>Do not say the numbers</i>			MA5. ARE YOU ABLE TO COMPLETE THE FOLLOWING ADDITION? A. 4+2= B. 13+3= <i>Show Card</i> <i>Do not say the number</i>		MA6. ARE YOU ABLE TO COMPLETE THE FOLLOWING SUBTRACTION? A. 3-1= B. 12-9= <i>Show Card</i> <i>Do not say the numbers</i>		MA7. ORAL QUESTION: ARE YOU ABLE TO SOLVE THE FOLLOWING PROBLEMS I WILL READ OUT LOUD? A. MOHAMMED HAS 2 MANGOES. HIS FATHER GIVES HIM 5 MORE MANGOES. HOW MANY DOES HE HAVE NOW? B. THERE ARE 8 KIDS WALKING TO SCHOOL. 6 ARE BOYS, AND THE OTHERS ARE GIRLS. HOW MANY GIRLS ARE WALKING TO SCHOOL ?		MA8. ARE YOU ABLE TO IDENTIFY THE TRIANGLE AMONG THE FOLLOWING FIGURES? <i>Show Card</i>	MA9. ARE YOU ABLE TO COMPLETE THE FOLLOWING CALCULATIONS? A. 2X4= B. 12 : 3= <i>Show Card</i> <i>Do not say the numbers</i>		MA10. ORAL QUESTION: AMADOU GOES 180KM IN 6 HOURS. WHAT IS HIS AVERAGE SPEED? 180KM/H 60KM/H 30KM/H
ID	NAME	COUNT	A= 3	B= 9	A= 4	B= 7	A = 8	B= 63	C = 381	A = 6	B = 16	A = 2	B = 3	A = 7	B = 2	TRIANGLE	A = 8	B = 4	30 KM/H
01		<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
02		<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
03		<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
04		<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
05		<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
06		<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
07		<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
08		<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
09		<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10		<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

After finishing the test, say "Very good effort! Thank you!"

INTERVIEW RESULT Village ID: Household Number **RE**

AFTER THE QUESTIONNAIRE HAS BEEN COMPLETED, FILL IN THE FOLLOWING INFORMATION:

RE1. RESULT OF HOUSEHOLD INTERVIEW:

COMPLETE.....01 REFUSED 03
 INCOMPLETE02 OTHER (SPECIFY).....96

RE2. *INTERVIEWER/SUPERVISOR NOTES:* USE THIS SPACE TO RECORD NOTES ABOUT THE INTERVIEW WITH THIS HOUSEHOLD.

RE3A. NAME OF DATA ENTRY CLERK -1ST ENTRY: _____

DATA ENTRY CLERK NUMBER:

DATA ENTRY DAY/MONTH/YEAR: / /

RE3B. NAME OF DATA ENTRY CLERK -2ND ENTRY: _____

DATA ENTRY CLERK NUMBER:

DATA ENTRY DAY/MONTH/YEAR: / /