

# OECD Programme for International Student Assessment 2015

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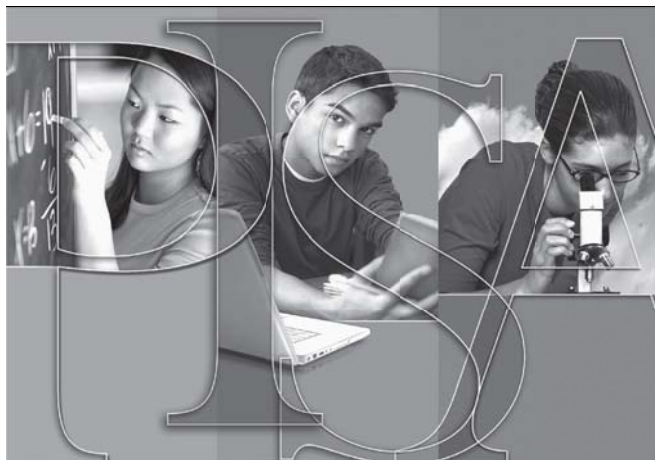
*Luxembourg*

Test Date (PISA 2015 Main Survey)		
<hr/>	<hr/>	2015
Day	Month	

## Parent Questionnaire

English 313

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- cApStAn Linguistic Quality Control (Belgium)
- Deutsches Institut für Internationale Pädagogische Forschung (Germany)
- Educational Testing Service (USA)
- Pearson (UK)
- Statistics Canada (Canada)
- The Tao Initiative: CRP - Henri Tudor and Université de Luxembourg
- Westat (USA)



## **What is this questionnaire about?**

The student who brought this questionnaire home was selected to participate in the Programme for International Student Assessment (PISA), a research study which mainly focuses on the scientific literacy of students who are 15 years old, but which also includes an assessment of mathematics and reading. The study is organised by the Organisation for Economic Co-operation and Development (OECD) and it surveys students from about 70 different countries.

In the PISA study, students are asked to answer questions concerning scientific, mathematical, reading, and problem solving literacy, and to provide information on their background, beliefs and opinions on issues that generally relate to science, schooling and their careers. As part of the study, we are also surveying students' parents on a number of similar topics including:

- Information about the student and the family
- Your child's school
- Your child's educational pathway
- Your views on science and the environment
- Background information

The information you provide will be extremely valuable in building up a picture of how scientific literacy develops in students and what influences its development.

## **When I am asked about science, what should I think about?**

For the purpose of this questionnaire, science refers to the skills and knowledge acquired in subjects like integrated science, physics, chemistry and biology.

## **Who should complete this questionnaire?**

This questionnaire should be completed by a parent (or jointly by both parents) or other primary caregiver of the student. To make the wording of the questions simple, the student who brought this questionnaire home is often referred to as 'your child'.

We ask you to respond to all the questions you feel comfortable answering. There are no right or wrong answers and we assure you that your responses to this questionnaire will be kept confidential.

Please fill in this questionnaire within two weeks and ask your child to return it in the sealable envelope that has been provided. The Parent Questionnaires will be collected by the class teacher and sent to the Ministry of Education, Children and Youth.

More information on the PISA study can be found on the Internet at <http://www.oecd.org/pisa> or <http://www.men.public.lu>.

## SECTION A: YOUR FAMILY

**Q1      Who will complete this questionnaire?**

*(Please tick all that apply.)*

Mother or other female guardian

☐ <sub>1</sub>

Father or other male guardian

☐ <sub>1</sub>

Other

☐ <sub>1</sub>

*Please answer this question with reference to the student who brought this questionnaire home.*

**Q2**

**Thinking back to when your child was about 10 years old, how often would your child have done these things?**

*(Please tick only one box in each row.)*

	<i>Very often</i>	<i>Regularly</i>	<i>Sometimes</i>	<i>Never</i>
Watched TV programmes about science	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Read books on scientific discoveries	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Watched, read or listened to science fiction	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Visited web sites about science topics	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Attended a science club	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Construction play, e.g. lego bricks	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Took apart technical devices	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Fixed broken objects or items, e.g. broken electronic toys	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Experimented with a science kit, electronics kit, or chemistry set, used a microscope or telescope	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Played computer games with a science content	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

**Q3 How often do you or someone else in your home do the following things with your child?**

*(Please tick only one box in each row.)*

	<i>Never or hardly ever</i>	<i>Once or twice a year</i>	<i>Once or twice a month</i>	<i>Once or twice a week</i>	<i>Every day or almost every day</i>
Discuss how well my child is doing at school.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
Eat the main meal with my child around a table.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
Spend time just talking to my child.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
Help my child with his/her science homework.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
Ask how my child is performing in science class.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
Obtain science-related materials (e.g. applications, software, study guides etc.) for my child.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
Discuss with my child how science is used in everyday life.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
Discuss science related career options with my child.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>

**Q4**

**Thinking about the last academic year, to what extent do you agree with the following statements?**

*(Please tick only one box in each row.)*

	<i>Strongly disagree</i>	<i>Disagree</i>	<i>Agree</i>	<i>Strongly agree</i>
I am interested in my child's school activities.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
I am supportive of my child's efforts at school and his/her achievements.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
I support my child when he/she is facing difficulties at school.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
I encourage my child to be confident.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>



## SECTION B: YOUR CHILD'S SCHOOL

*We are interested in the options you had as parents when choosing the school your child is currently attending.*

**Q5**

**Which of the following statements best describes the schooling available to students in your location?**

*(Please tick only one box.)*

There are two or more other schools in this area that compete with the school my child is currently attending.

☐ <sub>1</sub>

There is one other school in this area that competes with the school my child is currently attending.

☐ <sub>2</sub>

There are no other schools in this area that compete with the school my child is currently attending.

☐ <sub>3</sub>

**Q6**      **How important are the following reasons for choosing a school for your child?**

*(Please tick only one box in each row.)*

	<i>Not important</i>	<i>Somewhat important</i>	<i>Important</i>	<i>Very important</i>
The school is at a short distance to home.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
The school has a good reputation.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
The school offers particular courses or school subjects.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
The school adheres to a particular religious philosophy.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
The school has a particular approach to pedagogy/didactics, e.g. Waldorf pedagogy.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Other family members attended the school.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Expenses are low (e.g. tuition, books, room and board).	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
The school has financial aid available, such as a school loan, scholarship, or grant.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
The school has an active and pleasant school climate.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
The academic achievements of students in the school are high.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
There is a safe school environment.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

*We are interested in what you think about your child's school.*

**Q7**

**How much do you agree or disagree with the following statements?**

*(Please tick only one box in each row.)*

	<i>Strongly agree</i>	<i>Agree</i>	<i>Disagree</i>	<i>Strongly disagree</i>
Most of my child's school teachers seem competent and dedicated.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Standards of achievement are high in my child's school.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
I am happy with the content taught and the instructional methods used in my child's school.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
I am satisfied with the disciplinary atmosphere in my child's school.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
My child's progress is carefully monitored by the school.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
My child's school provides regular and useful information on my child's progress.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
My child's school does a good job in educating students.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
My child's school provides an inviting atmosphere for parents to get involved.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
My child's school provides effective communication between the school and families.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

	<i>Strongly agree</i>	<i>Agree</i>	<i>Disagree</i>	<i>Strongly disagree</i>
My child's school involves parents in the school's decision-making process.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
My child's school offers parent education (e.g. courses on family literacy) or family support programmes (e.g. to assist with health, nutrition).	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
My child's school informs families about how to help students with homework and other school-related activities.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
My child's school cooperates with community services to strengthen school programmes and student development.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

**Q8 During the last academic year, have you participated in any of the following school-related activities?**

*(Please tick only one box in each row.)*

	<i>Yes</i>	<i>No</i>	<i>Not supported by school</i>
Discussed my child's behaviour with a teacher on my own initiative.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
Discussed my child's behaviour on the initiative of one of his/her teachers.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
Discussed my child's progress with a teacher on my own initiative.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
Discussed my child's progress on the initiative of one of their teachers.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
Participated in local school government, e.g. parent council or school management committee.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
Volunteered in physical or extra-curricular activities (e.g. building maintenance, carpentry, gardening or yard work, school play, sports, field trip).	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
Volunteered to support school activities (volunteered in the school library, media centre, or canteen, assisted a teacher, appeared as a guest speaker).	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
Attended a scheduled meeting or conferences for parents.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
Talked about how to support learning at home and homework with my child's teachers.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
Exchanged ideas on parenting, family support, or the child's development with my child's teachers.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>

**Q9**      **During the last academic year, has your participation in activities at your child's school been hindered by any of the following issues?**

*(Please tick only one box in each row.)*

	<i>Yes</i>	<i>No</i>
The meeting times were inconvenient.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
I was not able to get off from work.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
I had no one to take care of my child/ children.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
The way to school is unsafe.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
I had problems with transportation.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
I felt unwelcome at my child's school.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
My language skills were not sufficient.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
I think participation is not relevant for my child's development.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
I do not know how I could participate in school activities.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
My child does not want me to participate.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

**Q10 We are interested in parents' interaction with the child's school friends and school staff.**

*(Please tick only one box in each row.)*

	0	1-2	3-5	6 or more
How many parents of your child's friends at this school do you know?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
How many friends of your child at school do you know by name?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
How many of the school staff would you feel comfortable talking to you had a question about your child?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>



**SECTION C: EDUCATIONAL PATHWAYS IN EARLY  
CHILDHOOD**

**Q11**      **At what age did your child start attending primary school?**

Years:

\_\_\_\_\_

**Q12 Did your child regularly attend an arrangement with one of the following main purposes prior to grade 1 in primary school?**

*(Please tick only one box in each row.)*

	<i>Yes</i>	<i>No</i>	
Supervision and care (e.g. crèche, day-nursery, childminder)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<i>If yes, please answer questions Q13-Q16.</i>
Pre-primary education (e.g. nursery-school, kindergarten, pre-school)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<i>If yes, please answer questions Q17-Q20.</i>

*In case your child did not visit any early childhood education and care arrangement prior to grade 1 in primary school, please proceed to Q21.*

**Q13 At what ages did your child attend a supervision and care arrangement (e.g. crèche, day-nursery, child minder) prior to grade 1 in primary school?**

*(Please tick all that apply.)*

Up to age 1	<input type="checkbox"/> <sub>1</sub>
Age 1	<input type="checkbox"/> <sub>1</sub>
Age 2	<input type="checkbox"/> <sub>1</sub>
Age 3	<input type="checkbox"/> <sub>1</sub>
Age 4	<input type="checkbox"/> <sub>1</sub>
Age 5	<input type="checkbox"/> <sub>1</sub>
Age 6	<input type="checkbox"/> <sub>1</sub>
Age 7	<input type="checkbox"/> <sub>1</sub>

**Q14**      **Who took care of or educated your child in a supervision and care arrangement?**

*(Please tick all that apply.)*

- |                                                                                        |                                       |
|----------------------------------------------------------------------------------------|---------------------------------------|
| An underage sibling of the child                                                       | <input type="checkbox"/> <sub>1</sub> |
| An adult relative of the child (e.g. grandparents)                                     | <input type="checkbox"/> <sub>1</sub> |
| An adult untrained in child care, not a relative (e.g. baby-sitter, friend, neighbour) | <input type="checkbox"/> <sub>1</sub> |
| A trained adult (e.g. teacher, nurse)                                                  | <input type="checkbox"/> <sub>1</sub> |

**Q15**      **Where was your child cared for or educated in a supervision and care arrangement?**

*(Please tick all that apply.)*

- |                                                                   |                                       |
|-------------------------------------------------------------------|---------------------------------------|
| The child's own home                                              | <input type="checkbox"/> <sub>1</sub> |
| Another person's private home                                     | <input type="checkbox"/> <sub>1</sub> |
| An institutional setting (e.g. crèche, day-nursery, child minder) | <input type="checkbox"/> <sub>1</sub> |
| Another place                                                     | <input type="checkbox"/> <sub>1</sub> |

**Q16**      **What was the most important reason why your child attended a supervision and care arrangement?**

*(Please tick only one box.)*

Attendance was mandatory. ☐ <sub>1</sub>

We/I could not care for the child (e.g. work, illness). ☐ <sub>2</sub>

We/I wanted additional learning stimulation for the child (e.g. social, academic). ☐ <sub>3</sub>

Most other children attended a supervision and care arrangement. ☐ <sub>4</sub>

**Q17**      **At what ages did your child attend a pre-primary education arrangement (e.g. nursery-school, kindergarten, pre-school) prior to grade 1 in primary school?**

*(Please tick all that apply.)*

Up to age 1	<input type="checkbox"/> <sub>1</sub>
Age 1	<input type="checkbox"/> <sub>1</sub>
Age 2	<input type="checkbox"/> <sub>1</sub>
Age 3	<input type="checkbox"/> <sub>1</sub>
Age 4	<input type="checkbox"/> <sub>1</sub>
Age 5	<input type="checkbox"/> <sub>1</sub>
Age 6	<input type="checkbox"/> <sub>1</sub>
Age 7	<input type="checkbox"/> <sub>1</sub>



*Please consider now the last pre-primary education arrangement which your child attended prior to grade 1 in primary school.*

**Q18****What type of provider offered this pre-primary education arrangement?**

*(Please tick only one box.)*

Public management and mainly public funding  
(e.g. state, city, municipality)

☐ <sub>1</sub>

Private management and mainly public funding

☐ <sub>2</sub>

Private management and mainly private funding  
(e.g. foundations, private institutions, companies)

☐ <sub>3</sub>

**Q19**      **How many hours per week did your child attend a pre-primary education arrangement at the age of three years?**

*(Please tick only one box.)*

0 hours per week	<input type="checkbox"/> <sub>1</sub>
up to 10 hours per week	<input type="checkbox"/> <sub>2</sub>
11-20 hours per week	<input type="checkbox"/> <sub>3</sub>
21-30 hours per week	<input type="checkbox"/> <sub>4</sub>
31-40 hours per week	<input type="checkbox"/> <sub>5</sub>
41-50 hours per week	<input type="checkbox"/> <sub>6</sub>
51 hours per week or more	<input type="checkbox"/> <sub>7</sub>

**Q20****What was the most important reason why your child attended a pre-primary education arrangement?***(Please tick only one box.)*

Attendance was mandatory.

☐ <sub>1</sub>

We/I could not care for the child (e.g. work, illness).

☐ <sub>2</sub>

We/I wanted additional learning stimulation for the child (e.g. social, academic).

☐ <sub>3</sub>

Most other children attended a pre-primary education arrangement.

☐ <sub>4</sub>

**SECTION D: YOUR VIEWS ON SCIENCE AND THE ENVIRONMENT**

*The following questions refer to science-related careers. A science-related career is one that requires studying science at tertiary level (e.g. university). So, careers like engineer (involving physics), weather forecaster (involving Earth science), optician (involving biology and physics), and medical doctors (involving the medical sciences) are all examples of science-related careers.*

**Q21****Please answer the questions below.***(Please tick only one box in each row.)*

	Yes	No
Does anybody in your family (including you) work in a science-related career?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
Does your child show an interest in working in a science-related career?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
Do you expect your child will go into a science-related career?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
Has your child shown interest in studying science after completing secondary school?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
Do you expect your child will study science after completing secondary school?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

*Science is an important part of the PISA study. We are interested in parents' opinions on science and on environmental issues. The following question asks about your views towards science.*

**Q22 How much do you agree with the following statements?**

*(Please tick only one box in each row.)*

	<i>Strongly agree</i>	<i>Agree</i>	<i>Disagree</i>	<i>Strongly disagree</i>
Broad science is important to help us to understand the natural world.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Broad science is valuable to society.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Broad science is very relevant to me.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
I find that broad science helps me to understand the things around me.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Advances in broad science usually bring social benefits.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

Q23

**Do you see the environmental issues below as a serious concern for yourself and/or others?**

*(Please tick only one box in each row.)*

	<i>This is a serious concern for me personally as well as others</i>	<i>This is a serious concern for other people in Luxembourg but not for me personally</i>	<i>This is a serious concern only for people in other countries</i>	<i>This is not a serious concern for anyone</i>
Air pollution	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Extinction of plants and animals	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Clearing of forests for other land use	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Water shortages	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Nuclear waste	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Extreme weather conditions	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
Human contact with animal diseases	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

**Q24**

**Do you think problems associated with the environmental issues below will improve or get worse over the next 20 years?**

*(Please tick only one box in each row.)*

	<i>Improve</i>	<i>Stay about the same</i>	<i>Get worse</i>
Air pollution	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
Extinction of plants and animals	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
Clearing of forests for other land use	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
Water shortages	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
Nuclear waste	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
Extreme weather conditions	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
Human contact with animal diseases	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>



## **SECTION E: YOUR BACKGROUND**

**Q25 In what country were the following people in the child's family born?**

*(Please tick only one answer per column.)*

	<i>Mother</i>	<i>Father</i>	<i>Maternal Grand- mother</i>	<i>Maternal Grand- father</i>	<i>Paternal Grand- mother</i>	<i>Paternal Grand- father</i>
Luxembourg	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>1</sub>
Portugal	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>2</sub>
France	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>3</sub>
Belgium	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>4</sub>
Germany	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>5</sub>
Italy	<input type="checkbox"/> <sub>6</sub>	<input type="checkbox"/> <sub>6</sub>	<input type="checkbox"/> <sub>6</sub>	<input type="checkbox"/> <sub>6</sub>	<input type="checkbox"/> <sub>6</sub>	<input type="checkbox"/> <sub>6</sub>
Croatia/ Macedonia/ Montenegro/ Serbia/Bosnia and Herzegovina/ Kosovo	<input type="checkbox"/> <sub>7</sub>	<input type="checkbox"/> <sub>7</sub>	<input type="checkbox"/> <sub>7</sub>	<input type="checkbox"/> <sub>7</sub>	<input type="checkbox"/> <sub>7</sub>	<input type="checkbox"/> <sub>7</sub>
Other European Union Country	<input type="checkbox"/> <sub>8</sub>	<input type="checkbox"/> <sub>8</sub>	<input type="checkbox"/> <sub>8</sub>	<input type="checkbox"/> <sub>8</sub>	<input type="checkbox"/> <sub>8</sub>	<input type="checkbox"/> <sub>8</sub>
Cape Verde	<input type="checkbox"/> <sub>9</sub>	<input type="checkbox"/> <sub>9</sub>	<input type="checkbox"/> <sub>9</sub>	<input type="checkbox"/> <sub>9</sub>	<input type="checkbox"/> <sub>9</sub>	<input type="checkbox"/> <sub>9</sub>
Another Country	<input type="checkbox"/> <sub>10</sub>	<input type="checkbox"/> <sub>10</sub>	<input type="checkbox"/> <sub>10</sub>	<input type="checkbox"/> <sub>10</sub>	<input type="checkbox"/> <sub>10</sub>	<input type="checkbox"/> <sub>10</sub>

*Please answer the following question thinking just of expenses related to the student who brought this questionnaire home.*

**Q26**

**In the last twelve months, about how much would you have paid to educational providers for services?**

*In determining this, please include any tuition fees you pay to your child's school, any other fees paid to individual teachers in the school or to other teachers for any tutoring your child receives, as well as any fees for cram school.*

*Do **not** include the costs of goods like sports equipment, school uniforms, computers or textbooks if they are not included in a general fee (that is, if you have to buy these things separately).*

*Please remember we ask you to answer questions only if you feel comfortable doing so, and that all responses are kept **strictly confidential**.*

*(Please tick only one box.)*

Nothing	<input type="checkbox"/> <sub>1</sub>
More than 1 €but less than 100 €	<input type="checkbox"/> <sub>2</sub>
100 €or more but less than 800 €	<input type="checkbox"/> <sub>3</sub>
800 €or more but less than 1,600 €	<input type="checkbox"/> <sub>4</sub>
1,600 €or more but less than 2,400 €	<input type="checkbox"/> <sub>5</sub>
2,400 €or more	<input type="checkbox"/> <sub>6</sub>

**Q27      What is your annual household income?**

*Please add together the total income, before tax, from all members of your household.*

*Please remember we ask you to answer questions only if you feel comfortable doing so, and that all responses are kept **strictly confidential**.*

*(Please tick only one box.)*

Less than 20,000 €	<input type="checkbox"/> <sub>1</sub>
20,000 € or more but less than 35,000 €	<input type="checkbox"/> <sub>2</sub>
35,000 € or more but less than 50,000 €	<input type="checkbox"/> <sub>3</sub>
50,000 € or more but less than 65,000 €	<input type="checkbox"/> <sub>4</sub>
65,000 € or more but less than 80,000 €	<input type="checkbox"/> <sub>5</sub>
80,000 € or more	<input type="checkbox"/> <sub>6</sub>

***Thank you very much for your co-operation in completing this questionnaire!***