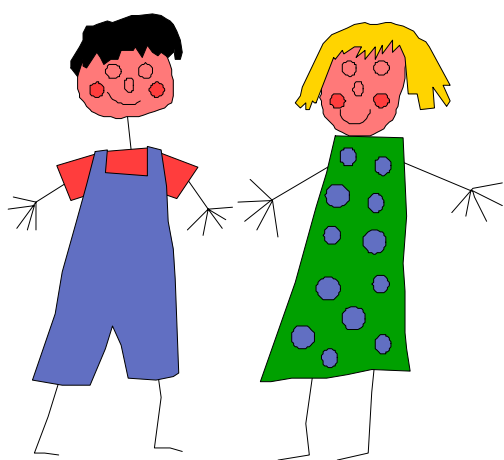
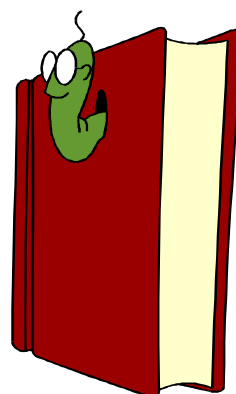


--	--	--	--	--	--	--	--	--

*ME AND*



*MY*



*SCHOOL*

Here are some questions about school.

You can ask someone else to help you do these if you wish.

Please be as truthful as you can.

## Section A

Please tell us what you think about school.

*Remember to put only one tick for each question.*

A1. Which of these is most like you?

I **always** like going to school

☐

1

**Most of the time** I like going to school

☐

2

I **don't** like going to school **much**

☐

3

I **never** like going to school

☐

4



A2. How **safe do you feel** in the **playground**?

Never

☐

1

Not very often

☐

2

Most of the time

☐

3

Always

☐

4



A3. How fair is your teacher?

**Always** fair

☐  
1

**Most of the time** my teacher is fair

☐  
2

**Sometimes** my teacher is not fair

☐  
3

My teacher is **never** fair

☐  
4

A4. What do you think about your school work?

It is **always** boring

☐  
1

**Most of the time** it is boring

☐  
2

**Most of the time** it is interesting

☐  
3

It is **always** interesting

☐  
4

A5. What do you do if you are **worried about something**?  
(You can tick more than 1 box if you like)

i) I keep it to myself

☐  
1

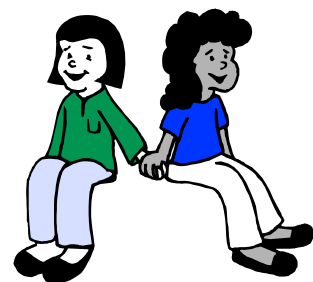
ii) I tell a friend

☐  
1

iii) I tell someone at home

☐  
1

iv) I tell a teacher

☐  
1

## AT SCHOOL

A6. How often do you get to do something **you are good at**?

Always	<input type="text" value="1"/>
Often (most days)	<input type="text" value="2"/>
Sometimes	<input type="text" value="3"/>
Never	<input type="text" value="4"/>

A7. Do you get **homework**?

Never	<input type="text" value="1"/>
Sometimes	<input type="text" value="2"/>
Often	<input type="text" value="3"/>
Always	<input type="text" value="4"/>

A8. Do you **feel happy at school**?

Never	<input type="text" value="1"/>	
Sometimes	<input type="text" value="2"/>	
Often	<input type="text" value="3"/>	
Always	<input type="text" value="4"/>	

A9. How **hard** is the **work** that your teacher gives you?

**Always** too hard for me

1

**Often** too hard

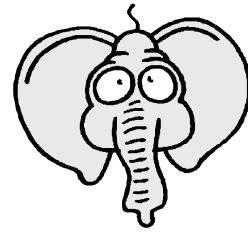
2

**Sometimes** too hard

3

**Never** too hard

4



A10. Now tell me how **easy** your work is:

**Never** too easy

1

**Sometimes** too easy

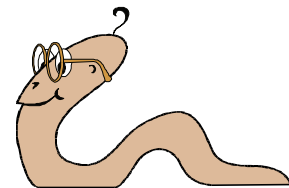
2

**Often** too easy

3

**Always** too easy

4



A11. What do **you** think about your work?

I think my work is **very good**

1

I think my work is **alright**

2

I think my work is **not very good**

3

4

I think my work is **terrible**

A12. Tell us how much you try at school:

I **always** do my best at school

**Most of the time** I do my best

**Sometimes** I do my best

I **never** do my best

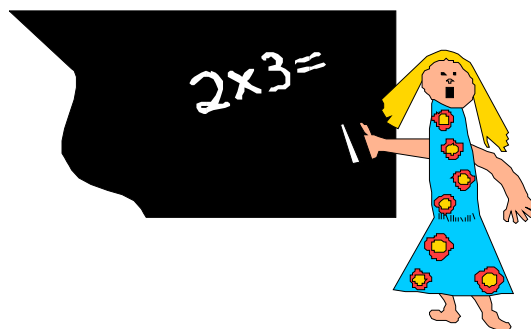
A13. How do you get on with your school work?

I **can't** do **anything** well

I can do **some things** well

I can do **most things** well

I can do **everything** well





A14. What does your teacher think?

My teacher thinks my work is  
**very good**

My teacher thinks my work is  
**quite good**

My teacher thinks my work  
**isn't very good**

My teacher thinks my work  
**is terrible**



A15. Do you like **answering questions** in class?

Never

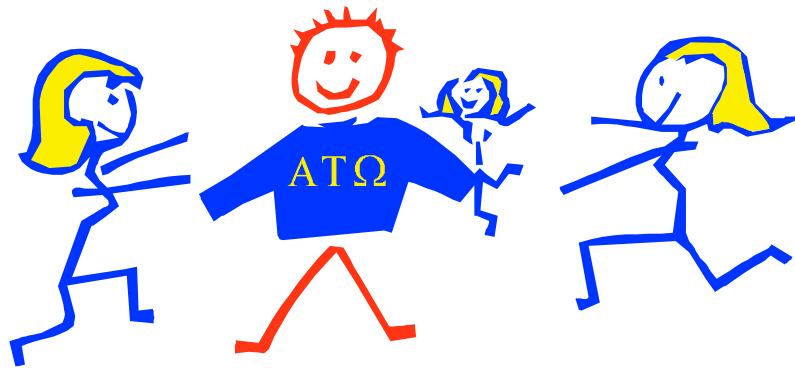
Sometimes

Often (most days)

Always







A16. How do you feel?

I **never** feel left out of things

I **sometimes** feel left out of things

I **often** feel left out of things

I **always** feel left out of things



A17. Which of these is **most like you**?

I **never** bully other children

I **sometimes** bully other children

I bully other children **quite often**

I bully other children **all the time**

A18. How do the children in your class **behave**?

They **always** behave **well**

**Most of the time** they behave **well**

**Most of the time** they behave **badly**

They **always** behave **badly**



A19. Except for holidays have you **stayed away from school** at all?

I've stayed off school **a lot**, even when I was not sick

I've stayed off school **a few times** when I was not sick

I've stayed off school **once** when I was not sick

I **always** go to school unless I am sick



A20. Have you **been bullied**?

I get bullied **all the time**

I get bullied **quite a lot**

I get bullied **a little bit**

Nobody **ever** bullies me

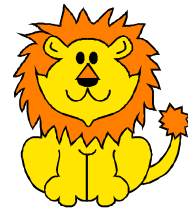
A21. What do you think?

I think I'm **very** clever

I think I'm **quite** clever

I think I'm **not very** clever

I think I'm **not** clever **at all**



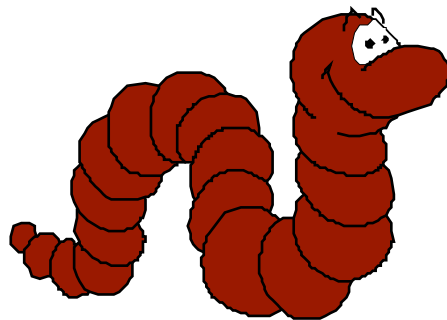
A22. What do **grown-ups at home** think?

They think I **always** behave **well**  
in school

They think I behave **well most**  
**of the time** in school

They think I behave **badly most**  
**of the time** in school

They think I **always** behave  
**badly** in school



A23. What do **you** think about how you behave **in school**?

I **always** behave **well** in school

I behave **well most of the time**

I behave **badly most of the time**

I **always** behave **badly**

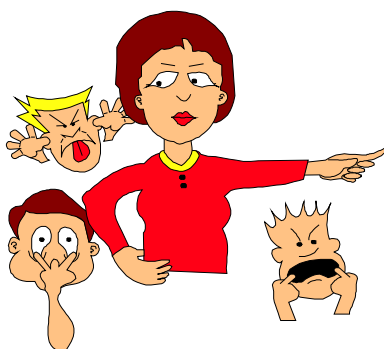
A24. Now choose one of these answers:

My teacher thinks I **always** behave **badly**

My teacher thinks I behave **badly** **most of the time**

My teacher thinks I behave **well** **most of the time**

My teacher thinks I **always** behave **well**



A25. Does your teacher tell you **how to make your work better**?

**Always** tells me

**Often** tells me

**Sometimes** tells me

**Never** tells me

A26. Now choose one of these answers:

My teacher **never** tells me  
I can do well

☐

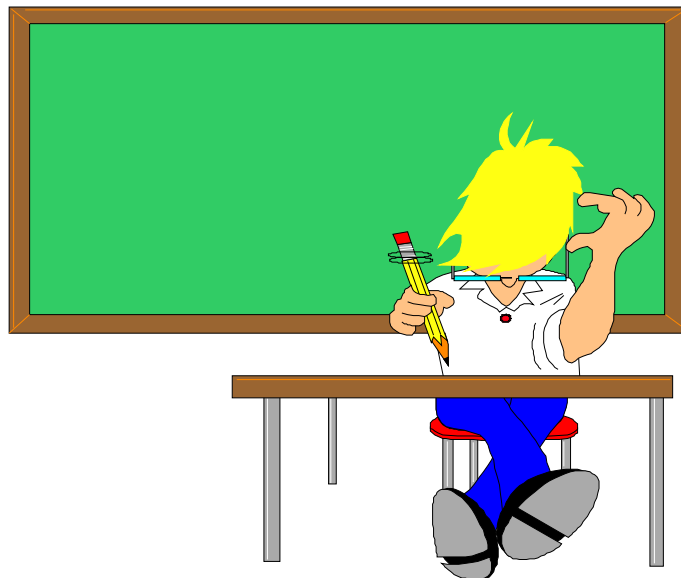
My teacher **sometimes** tells me  
I can do well

☐

My teacher **often** tells me  
I can do well

☐

My teacher **always** tells me  
I can do well

☐

A27.      What things do you **not like** about school?

.....

.....

.....

.....

.....

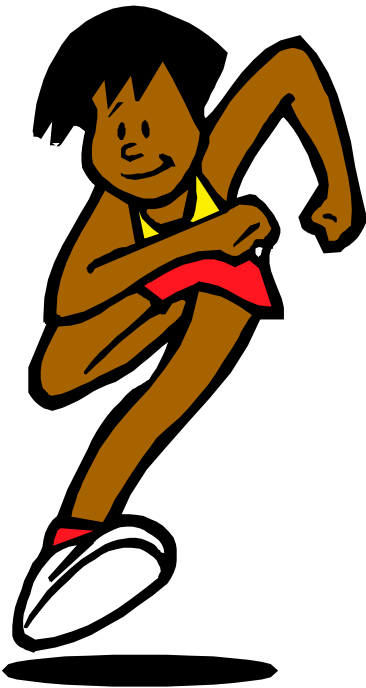
.....

.....

.....

.....

.....



A28.      What things do you **like best** about school?

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....





## Section B

B1. I am a boy

1

I am a girl

2

B2. Who helped you fill this in?

I did it all myself

1

A grown-up helped

2

Someone else helped

3

B3. When were you born?

Date

Month

Year

<input type="text"/>	<input type="text"/>
----------------------	----------------------

<input type="text"/>
----------------------

1	9	9	<input type="text"/>
---	---	---	----------------------

Thank you VERY much for your help

When completed, please send this back to:

Professor Jean Golding  
Children of the Nineties - ALSPAC  
Institute of Child Health  
24 Tyndall Avenue  
Bristol BS8 1BR Tel: Bristol 928 5007

*Permission to use the words on this questionnaire kindly given by the Institute of Education, University of London.*

*For office use only:*

*coder*

<input type="text"/>	<input type="text"/>
----------------------	----------------------

© University of Bristol