

ICPSR 4599

National Household Education Survey, 2005

*United States Department of Education.
National Center for Education Statistics*

Questionnaires

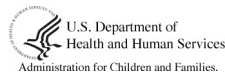
ICPSR | INTER-UNIVERSITY
CONSORTIUM FOR
POLITICAL AND
SOCIAL RESEARCH

P.O. Box 1248
Ann Arbor, Michigan 48106
www.icpsr.umich.edu

About *Research Connections*

These data are made available by the Child Care and Early Education *Research Connections* (CCEERC) project, which promotes high quality research in child care and early education and the use of that research in policymaking. Our vision is that children are well cared for and have rich learning experiences, and their families are supported and able to work.

Research Connections is supported by the Child Care Bureau, Administration for Children and Families of the United States Department of Health and Human Services through a cooperative agreement with the National Center for Children in Poverty, Mailman School of Public Health at Columbia University, and its partner, the Inter-university Consortium for Political and Social Research, Institute for Social Research at the University of Michigan.



APPENDIX A

NHES:2005 SCREENER, ECPP, ASPA, AND AE QUESTIONNAIRES

This page is intentionally blank.

NHES:2005 SCREENER

S1. Hello, this is (INTERVIEWER) and I'm calling for the United States Department of Education about a national research study. Are you a member of this household and at least 18 years old?

* YES 1 (GO TO S5)
 NO 2 (GO TO S2)
 PROBABLE BUSINESS 3 (GO TO S5)
 GO TO RESULT GT

S2. May I please speak with a household member who is at least 18 years old?

* AVAILABLE 1 (GO TO S1)
 NOT AVAILABLE 2 (GO TO RESULT,
 CALLBACK APPT.)
 THERE ARE NONE 3 (GO TO S3)
 GO TO RESULT GT

S3. May I please speak with the male or female head of this household?

* PERSON ON PHONE 1 (GO TO S5)
 OTHER PERSON, AVAILABLE 2 (GO TO S4)
 OTHER PERSON, NOT AVAILABLE 3 (GO TO RESULT,
 CALLBACK APPT.)
 GO TO RESULT GT

S4. Hello, this is (INTERVIEWER) and I'm calling for the United States Department of Education about a national research study. Are you a head of this household?

* YES 1 (GO TO S5)
 NO 2 (GO TO S3)
 GO TO RESULT GT

S5. Is this phone number used for...

* Home use, 4 (CONTINUE)
 Home and business use, or 5 (CONTINUE)
 Business use only? 6 (GO TO THANK1)
 GO TO RESULT GT

SCRN_15. The U.S. Department of Education is conducting a voluntary and confidential study about educational experiences of both children and adults. Are any of the people who normally live in your household age 15 or younger?

* YES 1
 NO 2
 GO TO RESULT GT

NOTE: Response categories shown in mixed upper and lower case are read to the respondent by the interviewer. Those shown in upper case are not read.

Variables designated by /R appear only on the restricted-use data file. Those designated by * do not appear on either the public-use or the restricted-use data files. They were used for administrative, verification, or coding purposes only.

*If SCRN_15=1 (household has children)
and household is designated for
adult enumeration (HHADLT=1),
go to S6 and enumerate all household members.*

*Else, if SCRN_15=1 (household has children)
and household is not designated for
adult enumeration (HHADLT= -1 or 2), go to S6
and enumerate household members age 15 or younger.*

*Else, if SCRN_15 NE 1 (household does not have
children) and household is designated for
adult enumeration (HHADLT=1 or 2), go to S16.*

*Else, if SCRN_15 NE 1 (household does not have
children) and household is not designated for
adult enumeration (HHADLT= -1), go to S25.*

S6. I have a few questions to see if someone in your household qualifies for the study. They take about 3 minutes. Please tell me only the first names and ages of all the (people/children age 15 or younger) who normally live in your household. Let's start with (you/the oldest child).

What is [(your/his or her) first name/the name of the next (person/ child)]?	Is this (person/child) male or female?	How old [are you/ Is (he/she)]?	SCREENER RESPONDENT
*	SEX1-SEX(n)	AGE1-AGE(n)	*

S6VERF1. I have listed (NUMBER) (people/children) in your household. Have we missed anyone (age 15 or younger) who usually lives here who is temporarily away from home or living in a dorm at school, or any babies or small children?

*

MATRIX CORRECT1
RETURN TO MATRIX.....2
GO TO RESULT.....GT

*Ask S7 for each person age 3-19.
If all children are younger than 3,
go to Child Sampling Point.*

S7. [Are you/is (CHILD)] attending (or enrolled in) (school/nursery school, kindergarten, or school)?

*

YES1
NO.....2

*If AGE=3 or 4, go to box after S9.
If AGE=5-15, ask S8.*

S8. [READ FIRST TIME: Some parents decide to educate their children at home rather than send them to school.] Is (CHILD) being schooled at home?

* YES1 (GO TO S9)
NO2 (GO TO BOX AFTER S9)

S9. So (he/she) is being schooled at home instead of at school for at least some classes or subjects?

* YES1 (GO TO S10)
NO2 (GO TO BOX)

*If S7=1 (child/person is enrolled in school), go to S9.
Else, go to first box after S13.*

S10. Is (CHILD) getting all of (his/her) instruction at home, or is (he/she) getting some at school and some at home?

* ALL AT HOME 1 (GO TO S13)
SOME AT SCHOOL & SOME AT HOME 2 (GO TO S11)

S11. How many hours each week does (CHILD) usually go to a school for instruction? Please do not include time spent in extracurricular activities.

* HOURS..... (GO TO BOX)

*If S11 >= 9 hours, then set HOMSCFLG = 1
(attends a school for at least 9 hours per week).
Else, HOMSCFLG= -1.
Then, go to S13.*

S12. What grade or year of school [are you/is (CHILD)] attending?
[PROBE FOR T OR P: Is that before or after kindergarten?]

*
 NURSERY/PRESCHOOL/PREKINDERGARTEN/HEAD START N (GO TO 1ST BOX AFTER S13)
 TRANSITIONAL KINDERGARTEN (BEFORE K)..... T (GO TO 1ST BOX AFTER S13)
 KINDERGARTEN K (GO TO 1ST BOX AFTER S13)
 PREFIRST GRADE (AFTER K) P (GO TO 1ST BOX AFTER S13)
 FIRST GRADE..... 1 (GO TO 1ST BOX AFTER S13)
 SECOND GRADE..... 2 (GO TO 1ST BOX AFTER S13)
 THIRD GRADE 3 (GO TO 1ST BOX AFTER S13)
 FOURTH GRADE 4 (GO TO 1ST BOX AFTER S13)
 FIFTH GRADE 5 (GO TO 1ST BOX AFTER S13)
 SIXTH GRADE..... 6 (GO TO 1ST BOX AFTER S13)
 SEVENTH GRADE 7 (GO TO 1ST BOX AFTER S13)
 EIGHTH GRADE 8 (GO TO 1ST BOX AFTER S13)
 NINTH GRADE/FRESHMAN IN HIGH SCHOOL 9 (GO TO 1ST BOX AFTER S13)
 TENTH GRADE/SOPHOMORE IN HIGH SCHOOL 10 (GO TO 1ST BOX AFTER S13)
 ELEVENTH GRADE/JUNIOR IN HIGH SCHOOL 11 (GO TO 1ST BOX AFTER S13)
 TWELFTH GRADE/SENIOR IN HIGH SCHOOL 12 (GO TO 1ST BOX AFTER S13)
 ABOVE TWELFTH GRADE..... 13 (GO TO 1ST BOX AFTER S13)
 UNGRADED ELEMENTARY/SECONDARY U (GO TO S13)
 SPECIAL EDUCATION S (GO TO S13)

[IF T: In this interview, we will be referring to that as "kindergarten."

IF P: In this interview, we will be referring to that as "prefirst grade."]

S13. What grade would [you/(CHILD)] be in if (you/he/she) were attending a school with regular grades/What grade or year is (CHILD) attending?
[PROBE FOR T OR P: Is that before or after kindergarten?]

*
 NURSERY/PRESCHOOL/PREKINDERGARTEN/HEAD START N
 TRANSITIONAL KINDERGARTEN (BEFORE K) T
 KINDERGARTEN K
 PREFIRST GRADE (AFTER K)..... P
 FIRST GRADE..... 1
 SECOND GRADE..... 2
 THIRD GRADE 3
 FOURTH GRADE 4
 FIFTH GRADE... 5
 SIXTH GRADE..... 6
 SEVENTH GRADE 7
 EIGHTH GRADE 8
 NINTH GRADE/FRESHMAN IN HIGH SCHOOL 9
 TENTH GRADE/SOPHOMORE IN HIGH SCHOOL 10
 ELEVENTH GRADE/JUNIOR IN HIGH SCHOOL 11
 TWELFTH GRADE/SENIOR IN HIGH SCHOOL 12
 ABOVE TWELFTH GRADE..... 13
 UNGRADED/NO EQUIVALENT U

[IF T: In this interview, we will be referring to that as "kindergarten."

IF P: In this interview, we will be referring to that as "prefirst grade."]

After last child, go to next box.

Child Sampling Point:

Children age 7 and younger are eligible. Children age 8 to 15 who are enrolled in N,T,K,P, grades 1-8, ungraded elementary/secondary, or special education are also eligible.

Children age 8 and older who are not enrolled in N,T,K,P, grades 1-8, ungraded elementary/secondary, or special education are ineligible.

Select child(ren) for ECPP and/or ASPA interviews.

If any children are selected, ask S14 and S15 for each sampled child. If two children are sampled, for 2nd child, ask if the most knowledgeable parent for 1st child is also most knowledgeable for 2nd child.
(If yes, copy name, age, and sex of parent respondent to 2nd child interview.)

If no children are selected, go to box before AINTRO.

S14. We would like to ask some questions about (CHILD)'s (care and) education. Who is the parent or guardian in this household who knows the most about (CHILD)'s (care and) education?

What is (your/his/her) first name (and age)?

* [IF CHILDREN ONLY HAVE BEEN ENUMERATED, RECORD FIRST NAME AND AGE AND VERIFY SEX OF PARENT INTERVIEW RESPONDENT.]

FIRST NAME_____ AGE_____ SEX_____ () [X IF SCRNM RESP]

[IF ALL HOUSEHOLD MEMBERS HAVE BEEN ENUMERATED, DISPLAY HOUSEHOLD MEMBERS AGE 12 AND OLDER. RECORD PERSON NUMBER OF RESPONDENT FOR PARENT INTERVIEW.]

PERSON NUMBER ☐☐

S15. What is [your/(PERSON)'s] relationship to (CHILD)? [VERIFY IF KNOWN]

RESRELN	MOTHER (BIRTH/ADOPTIVE/STEP/FOSTER).....	1
	FATHER (BIRTH/ADOPTIVE/STEP/FOSTER).....	2
	BROTHER, INCLUDING STEP, ADOPTED, AND FOSTER.....	3
	SISTER, INCLUDING STEP, ADOPTED, AND FOSTER	4
	GRANDMOTHER	5
	GRANDFATHER	6
	AUNT	7
	UNCLE	8
	COUSIN	9
	OTHER RELATIVE	10
RESRELOS/R	SPECIFY	
	NONRELATIVE.....	11
	SPECIFY	
	SAME SEX PARENT.....	12
	GIRLFRIEND OR PARTNER OF (CHILD)'S PARENT/ GUARDIAN.....	13
	BOYFRIEND OR PARTNER OF (CHILD)'S PARENT/ GUARDIAN.....	14

*After a respondent for each ECPP and/or ASPA interview
is selected, go to next box.*

*If household is sampled for an AE interview,
go to AINTRO.
Else, if children are selected for an ECPP and/or ASPA
interview only,
go to HHSELECT screen to select interview.
Else, go to S25.*

AINTRO. We are also interested in learning about the educational activities of adults.

*If SCR_N_15=1 (children age 15 and younger in household; all members have been enumerated),
go to box before S20.
Else if SCR_N_15=2, ask S16.*

S16. We are also interested in learning about the educational activities of adults. I have a few questions to see if someone in your household qualifies for the study. They take about 2 minutes. Please tell me only the first names and ages of all the people who normally live in your household. Let's start with you.

What is (your first name/the first name of the next person)?	Is this adult male or female?	How old [are you/is (he/she)]?	SCREENER RESPONDENT
*	SEX1-SEX(n)	AGE1-AGE(n)	*

S16VERF. I have listed (NUMBER) people in your household. Have we missed anyone who usually lives here who is temporarily away from home or living in a dorm at school, or any babies or small children?

MATRIX CORRECT1
RETURN TO MATRIX.....2
GO TO RESULT.....GT

Ask S17 for each person age 16-19. If all persons in household are age 20 or older, go to S20.

S17.
* [Are you/Is (PERSON)] attending (or enrolled in) school?

YES1 (GO TO S18)
NO.....2 (GO TO BOX AFTER S19)

S18. What grade or year of school [are you/is (PERSON)] attending?
[PROBE FOR T OR P: Is that before or after kindergarten?]

- * NURSERY/PRESCHOOL/PREKINDERGARTEN/HEAD START N (GO TO BOX AFTER S19)
 TRANSITIONAL KINDERGARTEN (BEFORE K)..... T (GO TO BOX AFTER S19)
 KINDERGARTEN K (GO TO BOX AFTER S19)
 PREFIRST GRADE (AFTER K) P (GO TO BOX AFTER S19)
 FIRST GRADE.....1 (GO TO BOX AFTER S19)
 SECOND GRADE.....2 (GO TO BOX AFTER S19)
 THIRD GRADE3 (GO TO BOX AFTER S19)
 FOURTH GRADE4 (GO TO BOX AFTER S19)
 FIFTH GRADE5 (GO TO BOX AFTER S19)
 SIXTH GRADE.....6 (GO TO BOX AFTER S19)
 SEVENTH GRADE7 (GO TO BOX AFTER S19)
 EIGHTH GRADE8 (GO TO BOX AFTER S19)
 NINTH GRADE/FRESHMAN IN HIGH SCHOOL9 (GO TO BOX AFTER S19)
 TENTH GRADE/SOPHOMORE IN HIGH SCHOOL10 (GO TO BOX AFTER S19)
 ELEVENTH GRADE/JUNIOR IN HIGH SCHOOL11 (GO TO BOX AFTER S19)
 TWELFTH GRADE/SENIOR IN HIGH SCHOOL12 (GO TO BOX AFTER S19)
 ABOVE TWELFTH GRADE.....13 (GO TO BOX AFTER S19)
 UNGRADED ELEMENTARY/SECONDARY U (GO TO S19)
 SPECIAL EDUCATION S (GO TO S19)

[IF T: In this interview, we will be referring to that as "kindergarten."
 IF P: In this interview, we will be referring to that as "prefirst grade."]

S19. What grade would (you/PERSON) be in if (you/he/she) were attending a school with
 regular grades?
 [PROBE FOR T OR P: Is that before or after kindergarten?]

- * NURSERY/PRESCHOOL/PREKINDERGARTEN/HEAD START N
 TRANSITIONAL KINDERGARTEN (BEFORE K)..... T
 KINDERGARTEN K
 PREFIRST GRADE (AFTER K)..... P
 FIRST GRADE.....1
 SECOND GRADE.....2
 THIRD GRADE3
 FOURTH GRADE4
 FIFTH GRADE...5
 SIXTH GRADE.....6
 SEVENTH GRADE7
 EIGHTH GRADE8
 NINTH GRADE/FRESHMAN IN HIGH SCHOOL9
 TENTH GRADE/SOPHOMORE IN HIGH SCHOOL10
 ELEVENTH GRADE/JUNIOR IN HIGH SCHOOL11
 TWELFTH GRADE/SENIOR IN HIGH SCHOOL12
 ABOVE TWELFTH GRADE.....13
 UNGRADED/NO EQUIVALENT U

[IF T: In this interview, we will be referring to that as "kindergarten."
 IF P: In this interview, we will be referring to that as "prefirst grade."]

If person is <16 years old or enrolled in grade 12 or below, ungraded elementary/secondary, or special education, he or she is ineligible for an AE interview. If person age ≥ 16, is enrolled in school (SENROL=1) and grade is above 12th grade (SGRADE=13 or SGRADEQ=13), autocode S21=1 (participant) and go to next person. Ask S20 for each person age ≥ 16.

S20. [Now I have a few questions about (you/you and the other person(s) in your household)]. [Do you/Does (ADULT)] have a high school diploma or its equivalent, such as a GED?

* YES1
NO.....2

S21. During the past 12 months, [did you/did (PERSON) take classes, courses, programs, workshops, or training of any kind for any reason?

* YES1
NO.....2

After last adult, go to next box.

Adult Sampling Point:

Select adult for AE interview. If adult is selected and age < 65, go to S22; if age is => 65, go to box after S24.

If no adult is selected, and no child was selected for an ECPP and/or ASPA interview, go to S25.

If no adult is selected and child(ren) were selected for an ECPP and/or ASPA interview, go to HHSELECT screen to select interview.

S22. Not counting the Reserves or National Guard, (are you/is PERSON) currently serving on active duty in the U.S. Armed Forces?

* YES1 (INELIGIBLE. GO TO BOX AFTER S24)
NO.....2 (GO TO BOX)

*Ask S23 if sampled adult is not the Screener respondent
and is age 16-25. Else, go to box after S24.*

S23. Is (PERSON) living at home, in student housing, or somewhere else?

- * AT HOME.....1 (GO TO BOX AFTER S24)
STUDENT HOUSING [This includes all housing owned,
sponsored, or leased by the school such as a
dormitory or fraternity or sorority house.].....2 (GO TO S24)
OTHER PRIVATE HOME OR APARTMENT3 (INELIGIBLE. GO TO BOX AFTER
S24)
- INSTITUTION OR GROUP QUARTERS [THIS INCLUDES A
JAIL OR DETENTION CENTER, MEDICAL FACILITY,
REHABILITATION CENTER, MENTAL HEALTH FACILITY,
MILITARY BARRACKS, OR GROUP FOSTER CARE.]4 (INELIGIBLE. GO TO
BOX AFTER S24)

S24. Would you please give me (his/her) last name and telephone number so that we can call
(him/her) to do a brief interview about (his/her) educational activities?

- * LAST NAME _____
PHONE _____

*If selected adult is ineligible,
and no child was selected for an ECPP and/or ASPA
interview, go to S25.
Else, go to HHSELECT screen to select interview.*

S25. I have just a few more questions. Do you...

- * Own your home,.....1
Rent your home, or2
Have some other arrangement?3

S26. Besides (PHONE NUMBER), do you have other telephone numbers in your household, not including
cellular telephones?

- * YES1 (GO TO S28)
NO.....2 (GO TO S29)
NOT MY NUMBER3 (GO TO S27)

S27. [INTERVIEWER: ASK FOR AND RECORD THE TELEPHONE NUMBER REACHED. RECORD REASON FOR
REACHING DIFFERENT TELEPHONE NUMBER.]

- * TELEPHONE NUMBER REACHED _____
AREA CODE CHANGE1
OTHER NUMBER IN HOUSEHOLD.....2
ORIGINAL NUMBER IS THAT OF ANOTHER HOUSEHOLD AND
NUMBER IS BEING FORWARDED TO THIS HOUSEHOLD3
NEVER HEARD OF ORIGINAL NUMBER4
OTHER [RECORD EXPLANATION IN COMMENTS]5

If S27 = 3, go to THANK2. Else, for cases where S26 = 3 (not number dialed), ask S26 again with new number.

S28. How many of these additional telephone numbers are for home use, not including cellular telephones.

* NUMBER..... ☐☐ (GO TO BOX)

If S28 > 0 (other telephone numbers for home use), ask S30. Else, go to S29.

S29. Besides this phone number, do you have any telephone numbers in your household that are used for computer or fax lines?

* YES1 (GO TO S30)
NO2 (GO TO THANK2)

S30. How many of these additional telephone numbers are used for computer or fax lines?

* NUMBER..... ☐☐ (GO TO BOX)

If S30 = 0, go to THANK2. Else, ask S31.

S31. Some households have telephone numbers that are used both for talking and for computer or fax lines. (Is the number/Are any of the numbers) used for (a) computer or fax line(s) ever answered for talking?

* YES1 (GO TO BOX)
NO2 (GO TO THANK2)

If S30 = 1 (only 1 other telephone number for computer or fax), autocode S32 =1, and go to THANK2. Else, ask S32.

S32. How many computer or fax telephone numbers are also answered for talking?

* NUMBER..... ☐☐ (GO TO THANK2)

THANK1. Thank you, but we are only interviewing in private residences.

THANK2. Those are all the questions I have about your household. Thank you for your time.

This page is intentionally blank.

NHES:2005 EARLY CHILDHOOD PROGRAM PARTICIPATION INTERVIEW

Section	Page
PA. Age and Relationship to Household Members	A-15
PB. Current School Status.....	A-19
ED-EG. Early Childhood Care and Programs.....	A-22
ED Relative Care	A-22
EE Nonrelative Care	A-27
EG Center-based Programs.....	A-33
EH. (Early) Head Start	A-39
EI. Selection of Care and Difficulty Finding Care.....	A-40
EK. Home Activities	A-42
EL. Emerging Literacy and Numeracy	A-43
PT. Child Disability, Race, and Country of Origin	A-45
PU-PV. Parent/Guardian Characteristics	A-48
PU Mother Items	A-48
PV Father Items	A-54
PW. Household Characteristics.....	A-59

This page is intentionally blank.

Early Childhood Program Participation Interview

INTRO. [IF R WAS NOT SCREENER R AND THIS IS THE FIRST OR ONLY INTERVIEW FOR R: Hello, this is (INTERVIEWER). I'm calling for the U.S. Department of Education. We are conducting a voluntary and confidential national study about the educational experiences of children.]

I'd like to talk with you now about (CHILD). The interview is estimated to take (15/10) minutes or less.

AGE AND RELATIONSHIP TO HOUSEHOLD MEMBERS

PA1. First, I'd like to confirm (CHILD)'s age. In what month and year was (he/she) born?

MONTH

YEAR

CDOBMM
CDOBY

1	JANUARY	7	JULY
2	FEBRUARY	8	AUGUST
3	MARCH	9	SEPTEMBER
4	APRIL	10	OCTOBER
5	MAY	11	NOVEMBER
6	JUNE	12	DECEMBER

*Calculate AGE2004 = child's age on December 31, 2004.
Calculate current age for display in PA2. If current age does not match screener age or birth month is current month, ask PA2. Else, go to box after PA2.*

PA2. That would mean that (CHILD) [is (AGE)/turns or turned (AGE) this month]. Is that right?

* YES 1 (GO TO BOX)
NO 2 (RETURN TO PA1)

If child was born after December 31, 2004, or AGE2004 > 15, go to CLOSE1. Else, go to next box.

*If the screener R is the MKR and the whole household was enumerated in the screener (HHADULT=1,) go to RELINTRO.
Else, if this is interview for CHILD2 or CHILD3, go to RELINTRO. Else, if this is interview for CHILD1, go to PA3.*

NOTE: Response categories shown in mixed upper and lower case are read to the respondent by the interviewer. Those shown in upper case are not read.

Variables designated by /R appear only on the restricted-use data file. Those designated by * do not appear on either the public-use or the restricted-use data files. They were used for administrative, verification, or coding purposes only.

PA3.

[SCREENER WAS COMPLETED ON (DATE)]

Now I'd like to ask about all the people who live in your household with (CHILD). First, I need to verify the names and ages of all the people (you told me about earlier/ who are already listed on my computer screen).

[What is (your first name/the first name of the next person?)]	[How old (are you/is (he/she))?	[Is this person male or female?]	D TO DELETE
*	AGE1-AGE7	SEX1-SEX7	*

If adult in household was sampled for adult interview, go to PA3VER2. Else, go to PA3VER1.

PA3VER1.

[AFTER VERIFICATION COMPLETE]

Now, please tell me the first names and ages of all other people who normally live in your household.

PA3VER2.

I have listed (NUMBER) people in your household. Have we missed anyone who usually lives here who is temporarily away from home or living in a dorm at school, or any babies or small children?

MATRIX CORRECT 1
 RETURN TO MATRIX..... 2
 GO TO RESULT..... 3

RELINTRO.

Now I'd like to ask how all the people in your household are related to (CHILD).

If there is more than one child sampled in the household and they are siblings (RELATION [n]= 3,4) or cousins (RELATION[n]= 9), autocode the relationship (appropriately by sex for siblings) during the second or third child's interview and do not ask how CHILD1 is related to CHILD2 or CHILD3. If the respondent is the child's mother/father or same sex parent (S15 = 1, 2, or 12), copy relationship from Screener into RELATN[n] and ask PA5/PA6, then ask PA4 for every other household member. If respondent is not the child's mother/father, copy relationship from Screener into RELATN[n] and ask PA4 for every other household member.

PA4. How is (PERSON) related to (CHILD)? [VERIFY IF KNOWN.]

**RELATN1-
RELATN7**

MOTHER (BIRTH/ADOPTIVE/STEP/FOSTER)..... 1 (GO TO PA5)
 FATHER (BIRTH/ADOPTIVE/STEP/FOSTER)..... 2 (GO TO PA6)
 BROTHER, INCLUDING STEP,
 ADOPTED, AND FOSTER..... 3 (GO TO BOX AFTER PA6)
 SISTER, INCLUDING STEP,
 ADOPTED, AND FOSTER..... 4 (GO TO BOX AFTER PA6)
 GRANDMOTHER 5 (GO TO BOX AFTER PA6)
 GRANDFATHER 6 (GO TO BOX AFTER PA6)
 AUNT 7 (GO TO BOX AFTER PA6)
 UNCLE 8 (GO TO BOX AFTER PA6)
 COUSIN 9 (GO TO BOX AFTER PA6)
 OTHER RELATIVE 10 (GO TO BOX AFTER PA6)

**RELTOS1/R-
RELTOS7/R**

SPECIFY _____
 NONRELATIVE..... 11 (GO TO BOX AFTER PA6)
 SPECIFY _____
 SAME SEX PARENT..... 12 (GO TO BOX)
 GIRLFRIEND OR FEMALE PARTNER OF (CHILD)'S PARENT/
 GUARDIAN 13 (GO TO 2ND BOX)
 BOYFRIEND OR MALE PARTNER OF (CHILD)'S PARENT/
 GUARDIAN 14 (GO TO 2ND BOX)

If PA4 = 12 and sex=female (same sex parent/mother) go to PA5. If PA4 = 12 and sex = male (same sex parent/father), go to PA6. Ask PA4 for every other household member.

If PA4=13, autocode PA5=6. If PA4=14, autocode PA6=6. Else, ask PA5 for female parent/guardian(s) and PA6 for male parent/guardian(s). Then go to box after PA6.

PA5. [Are you/Is (PERSON)] (CHILD)'s ...

MOMTYPE1	Birth mother,	1
MOMTYPE2	Adoptive mother,	2
	Stepmother,	3
	Foster mother, or	4
	Other parent or guardian?	5
	FEMALE PARTNER OF PARENT	6

PA6. [Are you/Is (PERSON)] (CHILD)'s...

DADTYPE1	Birth father,	1
DADTYPE2	Adoptive father,	2
	Stepfather,	3
	Foster father, or	4
	Other parent or guardian?	5
	MALE PARTNER OF PARENT	6

If more than one mother or father, use lowest value between MOMTYPE1 and MOMTYPE2 or DADTYPE1 and DADTYPE2. If both same sex parents have the same value Choose MOMTYPE1 or DADTYPE1 for HHMOM or HHDAD.

Set HHMOM:

1 = birth/adoptive mother in household. 2 = step or foster mother, other parent/guardian, female partner of parent.

3 = no mom

and no dad, female R. 4 = else.

SET HHDAD:

1 = birth/adoptive father in household. 2 = step or foster father, other parent/guardian, male partner of parent. 3

= no mom

and no dad, male R. 4 = else.

CURRENT SCHOOL STATUS

If ECPP/ASPA Interview respondent was also the Screener respondent, copy responses to PB1 through PB7, and then go to box after PB7. Else, go to next box.

If AGE2004 >= 3, ask PB1. Else, go to box after PB7.

PB1. Now I'd like to talk with you about (CHILD)'s school experiences. Is (CHILD) attending (or enrolled in) (school/preschool, kindergarten, or school)?

ENROLL YES 1 (GO TO BOX)
NO 2 (GO TO BOX)

If AGE2004 >= 5, ask PB2. Else, if AGE2004 = 3 or 4 and PB1 = 1 (enrolled), go to PB6. Else, if AGE2004 = 3 or 4 and PB1 = 2 (not enrolled) go to box after PB7.

PB2. Some parents decide to educate their children at home rather than send them to school. Is (CHILD) being schooled at home?

HOMESCHL YES 1 (GO TO PB3)
NO 2 (GO TO 2ND BOX AFTER PB5)

PB3. So (CHILD) is being schooled at home instead of at school for at least some classes or subjects?

* YES 1 (GO TO PB4)
NO 2 (AUTOCODE PB2=2 AND GO TO 2ND BOX AFTER PB5)

PB4. Is (CHILD) getting all of (his/her) instruction at home, or is (he/she) getting some at school and some at home?

HOMEALL ALL AT HOME 1 (GO TO PB7)
SOME AT SCHOOL 2 (GO TO PB5)

PB5. How many hours each week does (CHILD) usually go to a school for instruction? Please do not include time spent in extracurricular activities.

HOMSCHR HOURS..... (GO TO 1ST BOX BELOW)

If PB5 >= 9 hours, then set HOMSCFLG = 1 (homeschooler attends a school for at least 9 hours per week). Else, HOMSCFLG= -1. Then, go to PB7.

If PB1 = 1 (enrolled) and (PB2 NE 1 or PB3 NE 1 (not in home school)), ask PB6. Else, if AGE2004 = 5 or 6 and PB1 = 2 (not enrolled) and (PB2 NE 1 or PB3 NE 1 (not in home school)), go to box after PB7. Else, if AGE2004= > 7 and PB1 = 2 (not enrolled) and (PB2 NE 1 or PB3 NE 1 (not in home school)), go to CLOSE1.

PB6. What grade or year is (CHILD) attending?
[PROBE FOR T OR P: Is that before or after kindergarten?]

GRADE

NURSERY/PRESCHOOL/PREKINDERGARTEN/HEAD START	N	(GO TO FIRST BOX AFTER PB7)
TRANSITIONAL KINDERGARTEN (BEFORE K)	T	(GO TO FIRST BOX AFTER PB7)
KINDERGARTEN	K	(GO TO FIRST BOX AFTER PB7)
PREFIRST GRADE (AFTER K)	P	(GO TO FIRST BOX AFTER PB7)
FIRST GRADE	1	(GO TO FIRST BOX AFTER PB7)
SECOND GRADE	2	(GO TO FIRST BOX AFTER PB7)
THIRD GRADE	3	(GO TO FIRST BOX AFTER PB7)
FOURTH GRADE	4	(GO TO FIRST BOX AFTER PB7)
FIFTH GRADE	5	(GO TO FIRST BOX AFTER PB7)
SIXTH GRADE	6	(GO TO FIRST BOX AFTER PB7)
SEVENTH GRADE	7	(GO TO FIRST BOX AFTER PB7)
EIGHTH GRADE	8	(GO TO FIRST BOX AFTER PB7)
NINTH GRADE/FRESHMAN	9	(GO TO CLOSE1)
TENTH GRADE/SOPHOMORE	10	(GO TO CLOSE1)
ELEVENTH GRADE/JUNIOR	11	(GO TO CLOSE1)
TWELFTH GRADE/SENIOR	12	(GO TO CLOSE1)
ABOVE TWELFTH GRADE	13	(GO TO CLOSE1)
UNGRADED	U	(GO TO PB7)
SPECIAL EDUCATION	S	(GO TO PB7)

[IF T: In this interview we will be referring to that as "kindergarten."

IF P: In this interview, we will be referring to that as "prefirst grade."]

PB7. (What grade would (CHILD) have been in if (he/she) were attending (school/a school with regular grades/ What grade or year is (CHILD) attending)?
[PROBE FOR T OR P: Is that before or after kindergarten?]

GRADEEQ

NURSERY/PRESCHOOL/PREKINDERGARTEN/HEAD START	N	(GO TO BOX)
TRANSITIONAL KINDERGARTEN (BEFORE K)	T	(GO TO BOX)
KINDERGARTEN	K	(GO TO BOX)
PREFIRST GRADE (AFTER K)	P	(GO TO BOX)
FIRST GRADE	1	(GO TO BOX)
SECOND GRADE	2	(GO TO BOX)
THIRD GRADE	3	(GO TO BOX)
FOURTH GRADE	4	(GO TO BOX)
FIFTH GRADE	5	(GO TO BOX)
SIXTH GRADE	6	(GO TO BOX)
SEVENTH GRADE	7	(GO TO BOX)
EIGHTH GRADE	8	(GO TO BOX)
NINTH GRADE/FRESHMAN	9	(GO TO CLOSE1)
TENTH GRADE/SOPHOMORE	10	(GO TO CLOSE1)
ELEVENTH GRADE/JUNIOR	11	(GO TO CLOSE1)
TWELFTH GRADE/SENIOR	12	(GO TO CLOSE1)
ABOVE TWELFTH GRADE	13	(GO TO CLOSE1)
UNGRADED, NO EQUIVALENT	U	(GO TO BOX)

[IF T: In this interview we will be referring to that as "kindergarten."

IF P: In this interview, we will be referring to that as "prefirst grade."]

Set PATH:

I = AGE2004 = 0, 1, 2 (**Infants/Toddlers**)

N = [(AGE2004 >= 3 and AGE2004 <= 6) and PB1 = 2 (not enrolled) and (PB2 NE 1 (not in home school) or PB3 NE 1)] or [PB6/PB7 (grade/equivalent) = N] or [PB7 (grade equivalent) = U, and AGE2004 = 3 or 4] (**Preschoolers**)

S = [PB6/PB7 (grade/equivalent) = T, K, P (kindergarten) or 1, 2, 3, 4, 5, 6, 7, or 8 and (PB2 NE 1 or PB3 NE 1 (not in home school))] or [PB7 (grade equivalent) = U, and AGE2004 >= 5 and <= 15 and (PB2 NE 1 or PB3 NE 1 (not in home school))] (**School-age**)

H = AGE2004 >= 5 and (PB2 = 1 and PB3 = 1 (home school)) and PB7 (grade equivalent) NE N (**Home schoolers**)

If PATH = I or N, go to ECPP interview EDINTRO. If PATH = S, go to ASPA interview SD1. If PATH = H, and HOMSCFLG = 1, go to ASPA interview SD1. If PATH = H, and HOMSCFLG = -1 go to PTINTRO.

Early Childhood Care and Programs

EDINTRO.

[FIRST PRESCHOOL INTERVIEW OR CALLBACK.]

[I'd like to talk with you about different types of child care (CHILD) may now receive on a regular basis from someone other than (you or) (his/her) parents (or guardians). This includes regular care and early childhood programs, whether or not there is a charge or fee, but not occasional babysitting.]

[SECOND PRESCHOOL INTERVIEW]

[Now let's talk about any care (CHILD) receives from relatives.]

Relative Care

ED1. Is (CHILD) now receiving care from a relative other than a parent on a regular basis, for example, from grandparents, brothers or sisters, or any other relatives?

RCNOW YES 1 (GO TO ED2)
NO 2 (GO TO EEINTRO)

ED2. Do you currently have more than one regular care arrangement with relatives for (CHILD)?

* YES 1 (GO TO ED2OV)
NO 2 (GO TO BOX AFTER ED2OV)

ED2OV. How many different regular care arrangements do you have with relatives?

[CODE 1 NOT USED.]
* TWO 2
THREE 3
FOUR OR MORE 4

<p><i>Ask ED5 through ED22OV for each relative who provides care for child.</i></p>

ED3. [Let's start with the relative who provides the most care./Now let's talk about the next relative who cares for (CHILD).]
[Is the relative who cares for (CHILD) (his/her)../Is that (CHILD)'s....]

RCTYPE1- RCTYPE4	Grandmother	1	(GO TO ED3OV)
	Grandfather	2	(GO TO ED3OV)
	Aunt,	3	(GO TO ED3OV)
	Uncle,	4	(GO TO ED3OV)
	Brother,	5	(GO TO ED3OV)
	Sister, or	6	(GO TO ED3OV)
	Another relative?	7	(GO TO ED3OV)
	NOW SAYS NO OTHER RELATIVE ARRANGEMENT [DISPLAY ONLY FOR 2ND OR HIGHER ARRANGEMENT]	9	(GO TO EEINTRO)

ED3OV. How old is (he/she/that person)?

RCAGE1- RCAGE4	YEARS	<input type="checkbox"/> <input type="checkbox"/>
---------------------------	-------------	---

ED4. Is this care provided in your home or another home?

RCPLACE1- RCPLACE4	OWN HOME	1
	OTHER HOME	2
	BOTH/VARIES	3

ED5. Is the care that (CHILD) receives from (his/her) (RELATIVE) regularly scheduled at least once each week?

RCWEEK1- RCWEEK4	YES	1	(GO TO ED7)
	NO	2	(GO TO ED6)

ED6. Does (CHILD)'s (RELATIVE) care for (him/her) on some other regularly scheduled basis, at least once each month?

RCMONTH1- RCMONTH4	YES	1	(GO TO ED9)
	NO	2	(GO TO BOX BEFORE ED23)

ED7. How many days each week does (CHILD) receive care from (his/her) (RELATIVE)?

RCDAYS1- RCDAYS4	DAYS	<input type="checkbox"/>
-----------------------------	------------	--------------------------

ED8. How many hours each week does (CHILD) receive care from (his/her) (RELATIVE)?

RCHRS1- RCHRS4	HOURS	<input type="checkbox"/> <input type="checkbox"/>
---------------------------	-------------	---

*If ED7 = 1 (relative care one day per week), then go to ED13.
Else, ask ED12.*

ED9. For how many weeks each month does (CHILD) receive care from (his/her) (RELATIVE)?

**RCWKMO1-
RCWKMO4**

WEEKS..... ☐

ED10. During (that week/those weeks) for how many days each week does (CHILD) receive care from (his/her) (RELATIVE)?

**RCDAYWK1-
RCDAYWK4**

DAYS ☐

ED11. And during (that week/those weeks), how many hours each week does (CHILD) receive care from (his/her) (RELATIVE)?

**RCHRWK1-
RCHRWK4**

HOURS..... ☐☐ (GO TO ED13)

ED12. On the days that (CHILD) receives care, that would be about (HOURS) per day, on average. Is that right?

* YES 1 (GO TO ED13)
NO 2 (CORRECTION SCREEN)

ED13. How old was (CHILD) in years and months when this particular regular care arrangement with (his/her) (RELATIVE) began?

**RCSTRTY1-
RCSTRTY4
RCSTRTM1-
RCSTRTM4**

YEARS () MONTHS ()

ED14. How many children are usually cared for together, in the same group at the same time, by (CHILD)'s (RELATIVE), counting (CHILD)? [IF IT VARIES, PROBE: How many children are there the majority of the time (CHILD) is there?]

**RCKIDS1-
RCKIDS4**

NUMBER OF CHILDREN ☐☐

ED15. Counting (CHILD)'s (RELATIVE), how many adults usually care for (him/her) at the same time during that care arrangement? [IF IT VARIES, PROBE: How many adults are there the majority of the time (CHILD) is there?]

**RCADLTS1-
RCADLTS4**

NUMBER..... ☐

ED16. What language does (CHILD)'s (RELATIVE) speak most when caring for (him/her)?

**RCSPEAK1-
RCSPEAK4** ENGLISH 1
SPANISH 2
ENGLISH AND SPANISH EQUALLY 3
ENGLISH AND ANOTHER LANGUAGE EQUALLY 4
SPECIFY _____
ANOTHER LANGUAGE 91
**RCSPKOS1/R
RCSPKOS4/R** SPECIFY _____

ED17. Will (CHILD)'s (RELATIVE) care for (him/her) when (CHILD) is...

	YES	NO
RCSKNFV1- RCSKNFV4 RCSKFV1 RCSKFV4 a. sick, but does not have a fever?	1	2
b. sick and has a fever?	1	2

ED18. In an average month, how many days would you say that (CHILD)'s (RELATIVE) cancels this care arrangement because (CHILD)'s (RELATIVE) is sick, has an appointment, or for another similar reason?

**RCCANCE1-
RCCANCE4** DAYS □□

CATI to calculate number of days per month. Number given in ED18 must be less than number of days per month in care.

ED19. Is there any charge or fee for the care (CHILD) receives from (his/her) (RELATIVE), paid either by you or some other person or agency?

**RCFEE1-
RCFEE4** YES 1 (GO TO ED20)
NO 2 (GO TO BOX AFTER ED22OV)

ED20. Do any of the following people or organizations help to pay for (CHILD)'s (relative) to care for (him/her)? How about...

	YES	NO
RCREL1-RCREL4 a. A relative of (CHILD) outside your household who provides money <u>specifically</u> for that care, not including general child support?	1	2
RCTANF1- RCTANF4 b. Temporary Assistance for Needy Families, or TANF?	1	2
RCSSAC1- RCSSAC4 c. Another social service, welfare, or child care agency?	1	2
RCEMPL1- RCEMPL4 d. An employer, not including a tax-free spending account for child care?	1	2
RCOTHER1- RCOTHER4 e. Someone else?	1	2

ED21. How much does your household pay for (CHILD'S) (RELATIVE) to care for (him/her), not counting any money that you may receive from others to help pay for care?
[IF NOTHING, ENTER ZERO.]

RCCOST1- RCCOST4 AMOUNT \$□□□□.□□

RCUNIT1- RCUNIT4 UNIT:
 PER HOUR..... 1
 PER DAY 2
 PER WEEK..... 3
 PER MONTH..... 4
 PER YEAR..... 5
 EVERY TWO WEEKS..... 6
 OTHER 91

**RCCSTOS1/R-
RCCSTOS4/R** SPECIFY _____

If ED21 = zero or number of children in the household age 15 or younger = 1, go to box after ED22OV. Else, ask ED22.

ED22. Is this amount for (CHILD) only or does it include other children in your household?

**RCCSTHH1-
RCCSTHH4** CHILD ONLY..... 1 (GO TO BOX AFTER ED22OV)
 CHILD AND OTHER(S) 2 (GO TO ED22OV)

ED22OV. How many children is this amount for, including (CHILD)?

**RCCSTHN1-
RCCSTHN4** NUMBER OF CHILDREN □

*If ED2 = 2 (one relative arrangement), ask ED23.
 Else, if ED2OV => 2 (more than one relative arrangement),
 return to ED3 until the number of arrangements in ED2OV are
 completed, then ask ED23.*

ED23. Does (CHILD) have another care arrangement with a relative on a regular basis?

* YES 1 (GO TO ED3)
 NO..... 2 (GO TO EEINTRO)

Nonrelative Care

EEINTRO.

[FIRST PRESCHOOL INTERVIEW OR CALLBACK.]

[Now let's talk about any care (CHILD) receives from someone not related to (him/her), either in your home or someone else's. This includes home child care providers or neighbors, but not day care centers or preschools.]

[SECOND PRESCHOOL INTERVIEW.]

[Now let's talk about any care (CHILD) receives from people who are not related to (him/her), not including daycare centers or preschools.]

EE1. Is (CHILD) now receiving care in your home or another home on a regular basis from someone who is not related to (him/her)?

NCNOW

YES 1 (GO TO EE2)
NO 2 (GO TO EGINTRO)

EE2. Do you currently have more than one regular care arrangement with a nonrelative for (CHILD)?

* YES 1 (GO TO EE2OV)
NO 2 (GO TO BOX AFTER EE2OV)

EE2OV. How many different regular care arrangements do you have with nonrelatives?

[CODE 1 NOT USED]

* TWO 2
THREE 3
FOUR OR MORE 4

<p><i>Ask EE3 through EE26OV for each nonrelative who cares for child.</i></p>
--

EE3. [Let's start with the nonrelative who provides the most care./Now let's talk about the next care provider.] Is this care provided in your own home or in another home?

NCPLACE1- OWN HOME..... 1 (GO TO EE4)
NCPLACE4 OTHER HOME..... 2 (GO TO EE5)
 BOTH/VARIES 3 (GO TO EE5)
 NOW SAYS NO OTHER NONRELATIVE ARRANGEMENT
 [DISPLAY ONLY FOR 2ND OR HIGHER ARRANGEMENT]..... 9 (GO TO EGINTRO)

EE4. Does this person who cares for (CHILD) live in your household?

NCINHH1- YES 1
NCINHH4 NO 2

EE5. Is the care that (CHILD) receives from that person regularly scheduled at least once each week?

NCWEEK1- YES 1 (GO TO EE7)
NCWEEK4 NO 2 (GO TO EE6)

EE6. Does that person care for (CHILD) on some other regularly scheduled basis, at least once each month?

NCMONTH1- YES 1 (GO TO EE9)
NCMONTH4 NO 2 (GO TO BOX BEFORE EE27)

EE7. How many days each week does (CHILD) receive care from that person?

NCDAYS1- DAYS ☐
NCDAYS4

EE8. How many hours each week does (CHILD) receive care from that person?

NCHRS1- HOURS.....☐☐
NCHRS4

<p><i>If EE7 = 1 (nonrelative care only 1 day per week) ask EE13. Else, go to EE12.</i></p>

EE9. For how many weeks each month does (CHILD) receive care from that person?

NCWKMO1- WEEKS..... ☐
NCWKMO4

EE10. During (that week/those weeks) for how many days each week does (CHILD) receive care from that person?

NCDAYWK1- DAYS ☐
NCDAYWK4

EE11. And during (that week/those weeks), how many hours each week does (CHILD) receive care from that person?

NCHRWK1- HOURS..... ☐☐ (GO TO EE13)
NCHRWK4

EE12. On the days that (CHILD) receives care, that would be about (HOURS) per day, on average. Is that right?

* YES 1 (GO TO EE13)
NO 2 (CORRECTION SCREEN)

EE13. How old was (CHILD) in years and months when this particular regular care arrangement with that person began?

NCSTRTY1- YEARS () MONTHS ()
NCSTRTY4
NCSTRTM1-
NCSTRTM4

EE14. How many children are usually cared for together, in the same group at the same time, by that person, counting (CHILD)? [IF IT VARIES, PROBE: How many children are there the majority of the time (CHILD) is there?]

NCKIDS1- NUMBER OF CHILDREN ☐☐
NCKIDS4

EE15. Counting that person, how many adults usually care for (CHILD) at the same time during that care arrangement? [IF IT VARIES, PROBE: How many adults are there the majority of the time (CHILD) is there?]

NCADLTS1- NUMBER..... ☐
NCADLTS4

EE16. Was this care provider someone you already knew?

NCALKNE1- YES 1
NCALKNE4 NO 2

EE17. How did you learn about this person as a care provider for (CHILD)?
[CODE ALL THAT APPLY.]

NCFRIEN1-		
NCFRIEN4	FRIENDS/NEIGHBORS/RELATIVES/COWORKERS.....	1
NCPLEMP1-		
NCPLEMP4	PLACE OF EMPLOYMENT	2
NCSCHOO1-		
NCSCHOO4	PUBLIC OR PRIVATE SCHOOL	3
NCCHURC1-		
NCCHURC4	CHURCH, SYNAGOGUE, OR OTHER PLACE OF WORSHIP	4
NCSOCWK1-		
NCSOCWK4	WELFARE OR SOCIAL SERVICE CASEWORKERS	5
NCADS1-		
NCADS4	NEWSPAPERS/ADVERTISEMENTS/YELLOW PAGES	6
NCAGENC1-		
NCAGENC4	RESOURCE AND REFERRAL (R&R) AGENCY.....	7
NCCARE1-		
NCCARE4	CHILD CARE PROVIDER OR AGENCY	8
NCKNEW1-		
NCKNEW4	R ALREADY KNEW PROVIDER	9
NCCHILD1-		
NCCHILD4	PROVIDER CARED FOR ANOTHER CHILD OF R'S	10
NCREFER1-		
NCREFER4	REFERENCE MATERIALS	11
NCBULLE1-		
NCBULLE4	PUBLIC BULLETIN BOARDS/FLYERS/DROVE/WALKED BY	12
NCINTR1-		
NCINTR4	INTERNET.....	13
NCSOURC1-		
NCSOURC4	OTHER	91
NCSOURO1/R-	SPECIFY _____	
NCSOURO4/R		

EE18. Is (CHILD)'s care provider of the same or a different race or ethnic background as (CHILD)?

NCRACE1-	SAME	1
NCRACE4	DIFFERENT	2

EE19. Is (CHILD)'s care provider age 18 or older?

NCAGE1-	YES	1	(GO TO EE20)
NCAGE4	NO.....	2	(GO TO EE19OV)

EE19OV. About how old is that person?

NCAGEYY1-	YEARS	□□□
NCAGEYY4		

EE20. What language does (CHILD)'s care provider speak most when caring for (CHILD)?

**NCSPEAK1-
NCSPEAK4** ENGLISH 1
SPANISH 2
ENGLISH AND SPANISH EQUALLY 3
ENGLISH AND ANOTHER LANGUAGE EQUALLY 4
SPECIFY _____
ANOTHER LANGUAGE 91
**NCSPKOS1/R-
NCSPKOS4/R** SPECIFY _____

EE21. Will (CHILD)'s care provider care for (him/her) when (CHILD) is...

		YES	NO
NCSKNFV1- NCSKNFV4	a. sick, but does not have a fever?	1	2
NCSKFV1- NCSKFV4	b. sick and has a fever?	1	2

EE22. In an average month, how many days would you say that care provider cancels this care arrangement because the provider is sick, has an appointment, or for another similar reason?

**NCCANCE1-
NCCANCE4** DAYS ☐ ☐

CATI to calculate number of days per month. Number given in EE22 must be less than number of days per month in care.

EE23 Is there any charge or fee for the care (CHILD) receives from that person, paid either by you or another person or agency?

**NCFEE1-
NCFEE4** YES 1 (GO TO EE24)
NO 2 (GO TO BOX AFTER EE26OV)

EE24. Do any of the following people or organizations help to pay for (CHILD) to be cared for by that person? How about...

		YES	NO
NCREL1- NCREL4	a. A relative of (CHILD) outside your household who provides money <u>specifically</u> for that care, not including general child support?	1	2
NCTANF1- NCTANF4	b. Temporary Assistance for Needy Families, or TANF?	1	2
NCSSAC1- NCSSAC4	c. Another social service, welfare, or child care agency?	1	2
NCEMPL1- NCEMPL4	d. An employer, not including a tax-free spending account for child care?	1	2
NCOTHER1- NCOTHER4	e. Someone else?	1	2

EE25. How much does your household pay this person to care for (CHILD), not counting any money that you may receive from others to help pay for care?
[IF NOTHING, ENTER ZERO.]

**NCCOST1-
NCCOST4**

AMOUNT \$□□□□.□□

**NCUNIT1-
NCUNIT4**

UNIT:

PER HOUR..... 1
PER DAY 2
PER WEEK..... 3
PER MONTH..... 4
PER YEAR..... 5
EVERY TWO WEEKS..... 6
OTHER 91

**NCCSTOS1/R-
NCCSTOS4/R**

SPECIFY _____

If EE25 = zero or number of children in the household age 15 or younger = 1, go to box after EE26OV. Else, ask EE26.

EE26. Is this amount for (CHILD) only or does it include other children in your household?

**NCCSTHH1-
NCCSTHH4**

CHILD ONLY..... 1 (GO TO BOX AFTER EE26OV)
CHILD AND OTHER(S) 2 (GO TO EE26OV)

EE26OV. How many children is this amount for, including (CHILD)?

**NCCSTHN1-
NCCSTHN4**

NUMBER..... □

If EE2 = 2 (one nonrelative arrangement), ask EE27. Else, if EE2OV => 2 (more than one nonrelative arrangement), return to EE3 until the number of arrangements in EE2OV are completed, then ask EE27.

EE27. Does (CHILD) have another care arrangement in a private home with a nonrelative on a regular basis?

*

YES 1 (GO TO EE3)
NO 2 (GO TO EGINTRO)

Center-based Programs

EGINTRO. Now let's talk about any day care centers and early childhood programs (CHILD) attends.

EG1. Is (CHILD) now attending a day care center, preschool, prekindergarten, or (Early) Head Start program?

CPNNOW YES 1 (GO TO EG2)
NO 2 (GO TO BOX BEFORE EH1)

EG2. How many different day care centers, preschools, prekindergartens, or (Early) Head Start programs does (CHILD) currently go to?

* NUMBER..... ☐

Ask EG5 through EG25OV for each program.

EG3. (Let's start with the program where (CHILD) spends the most time./Let's talk about the next program). Where is the program located? For example, is it in a church or synagogue, a school, a community center, its own building, or some other place?

**CPPLACE1-
CPPLACE4** OWN HOME..... 1 (GO TO EG6)
ANOTHER HOME 2 (GO TO EG6)
A CHURCH, SYNAGOGUE OR OTHER PLACE OF WORSHIP 3 (GO TO EG4)
A PUBLIC PRESCHOOL OR SCHOOL (K-12) 4 (GO TO EG5)
A PRIVATE PRESCHOOL OR SCHOOL (K-12) 5 (GO TO EG4)
A COLLEGE OR UNIVERSITY 6 (GO TO EG4)
A COMMUNITY CENTER..... 7 (GO TO EG4)
A PUBLIC LIBRARY 8 (GO TO EG5)
ITS OWN BUILDING 9 (GO TO EG4)
A PLACE OF EMPLOYMENT OR BUSINESS 10 (GO TO EG4)
OTHER 91 (GO TO EG4)
**CPPLCOS1/R-
CPPLCOS4/R** SPECIFY _____
NOW SAYS NO OTHER CENTER-BASED ARRANGEMENT
[DISPLAY ONLY FOR 2ND OR HIGHER ARRANGEMENT]..... 13 (GO TO BOX BEFORE EH1)

EG4. Is this program run by a church, synagogue, or other religious group?

**CPSPRLG1-
CPSPRLG4** YES 1
NO 2

EG5. Is that also the location of your job [or (his/her) (OTHER PARENT)'s job]?

**CPWORK1-
CPWORK4** YES 1
NO 2

EG6. Does (CHILD) go to that program on a regularly scheduled basis at least once each week?

CPWEEK1- YES 1 (GO TO EG8)
CPWEEK4 NO 2 (GO TO EG7)

EG7. Does (CHILD) go to that program on some other regularly scheduled basis at least once each month?

CPMONTH1- YES 1 (GO TO EG10)
CPMONTH4 NO 2 (GO TO BOX
BEFORE EG26)

EG8. How many days each week does (CHILD) go to that program?

CPDAYS1- DAYS ☐
CPDAYS4

EG9. How many hours each week does (CHILD) go to that program?

CPHRS1- HOURS ☐☐
CPHRS4

*If EG8 = 1 (center-based care 1 day per week) go to EG14.
Else, ask EG13.*

EG10. For how many weeks each month does (CHILD) go that that program?

CPWKMO1- WEEKS ☐
CPWKMO4

EG11. During (that week/those weeks), for how many days each week does (CHILD) go to that program?

CPDAYWK1- DAYS ☐
CPDAYWK4

EG12. And during (that week/those weeks), for how many hours each week does (CHILD) go to that program?

CPHRWK1- HOURS ☐☐ (GO TO EG14)
CPHRWK4

EG13. On the days that (CHILD) goes to the program, that would be about (HOURS) per day, on average. Is that right?

* YES 1 (GO TO EG14)
NO 2 (CORRECTION SCREEN)

EG14. How old was (CHILD) in years and months when (he/she) started going to this particular program?

CPSTRTY1- YEARS () MONTHS ()
CPSTRTY4
CPSTRTM1-
CPSTRTM4

EG15. How many children are usually in (CHILD)'s room or group, at the same time, at that program, counting (CHILD)? [IF IT VARIES, PROBE: How many children are there the majority of the time (CHILD) is there?]

CPKIDS1- NUMBER..... ☐☐
CPKIDS4

EG16. How many adults are usually in (CHILD)'s room or group, at the same time, at that program? [IF IT VARIES, PROBE: How many adults are there the majority of the time (CHILD) is there?]

CPADLTS1- NUMBER..... ☐☐
CPADLTS4

EG17. How did you learn about that program for (CHILD)?
[CODE ALL THAT APPLY.]

CPFRIEN1- FRIENDS/NEIGHBORS/RELATIVES/COWORKERS..... 1
CPFRIEN4
CPPLEMP1- PLACE OF EMPLOYMENT 2
CPPLEMP4
CPSCHOO1- PUBLIC OR PRIVATE SCHOOL 3
CPSCHOO4
CPCHURC1- CHURCH SYNAGOGUE, OR OTHER PLACE OF WORSHIP 4
CPCHURC4
CPSOCWK1- WELFARE OR SOCIAL SERVICE CASEWORKERS 5
CPSOCWK4
CPADS1- NEWSPAPERS/ADVERTISEMENTS/YELLOW PAGES 6
CPADS4
CPAGENC1- RESOURCE AND REFERRAL (R&R) AGENCY..... 7
CPAGENC4
CPCARE1- CHILD CARE PROVIDER OR AGENCY 8
CPCARE4
CPKNEW1- R ALREADY KNEW PROVIDER..... 9
CPKNEW4
CPCHILD1- ATTENDED BY ANOTHER CHILD OF R'S..... 10
CPCHILD4
CPREFER1- REFERENCE MATERIALS 11
CPREFER4
CPBULLE1- PUBLIC BULLETIN BOARDS/FLYERS/DROVE/WALKED BY 12
CPBULLE4
CPINTER1- INTERNET..... 13
CPINTER4
CPSOURC1- OTHER 91
CPSOURC4 SPECIFY _____
CPSOURO1/R-
CPSOURO4/R

EG18. Is (CHILD)'s main care provider or teacher at that program of the same or a different race or ethnic background as (CHILD)?

CPRACE1- SAME 1
CPRACE4 DIFFERENT 2

EG19. What language does (CHILD)'s main care provider or teacher at that program speak most with (him/her)?

CPSPEAK1- ENGLISH 1
CPSPEAK4 SPANISH 2
 ENGLISH AND SPANISH EQUALLY 3
 ENGLISH AND ANOTHER LANGUAGE EQUALLY 4
 SPECIFY _____
 ANOTHER LANGUAGE 91
CPSPKOS1/R- SPECIFY _____
CPSPKOS4/R

EG20. Does that program provide any of the following services to (CHILD) or your family?

		YES	NO
CPTTEST1- CPTTEST4	a. Hearing, speech, or vision testing?.....	1	2
CPPHYSE1- CPPHYSE4	b. Physical examinations?	1	2
CPDENTA1- CPDENTA4	c. Dental examinations?.....	1	2
CPDISAB1- CPDISAB4	d. Formal testing for developmental or learning problems?	1	2
CPSKNFV1- CPSKNFV4	e. Sick child care when (CHILD) is sick but does not have a fever?	1	2
CPSKFV1- CPSKFV4	f. Sick child care when (CHILD) is sick and has a fever? ..	1	2

EG21. Since September, how many times has (CHILD)'s main care provider or teacher at that program changed?

CPTEACH1- NO CHANGE..... 1
CPTEACH4 1-2 TIMES 2
 3 OR MORE TIMES 3

EG22. Is there any charge or fee for this program, paid either by you or some other person or agency?

CPFEE1- YES 1 (GO TO EG23)
CPFEE4 NO 2 (GO TO BOX AFTER EG25OV)

EG23. Do any of the following people or organizations help to pay for (CHILD) to go to that program?
How about...

		YES	NO
CPREL1-CPREL4	a. A relative of (CHILD) outside your household who provides money <u>specifically</u> for that program, not including general child support?	1	2
CPTANF1- CPTANF4	b. Temporary Assistance for Needy Families, or TANF?	1	2
CPSSAC1- CPSSAC4	c. Another social service, welfare, or child care agency?	1	2
CPEMPL1- CPEMPL4	d. An employer, not including a tax-free spending account for child care?	1	2
CPOTHER1- CPOTHER4	e. Someone else?	1	2

EG24. How much does your household pay for (CHILD) to go to that program, not counting any money that you may receive from others to help pay for care?
[IF NOTHING, ENTER ZERO.]

**CPCOST1-
CPCOST4** AMOUNT \$

**CPUNIT1-
CPUNIT4** UNIT:

PER HOUR..... 1

PER DAY 2

PER WEEK..... 3

PER MONTH..... 4

PER YEAR..... 5

EVERY TWO WEEKS..... 6

OTHER 91

**CPCSTOS1/R-
CPCSTOS4/R** SPECIFY _____

If EG24 = zero or number of children in household age 15 or younger = 1, go to box after EG25OV. Else, ask EG25.

EG25. Is this amount for (CHILD) only or does it include other children in your household?

**CPCSTHH1-
CPCSTHH4** CHILD ONLY 1 (GO TO BOX AFTER EG25OV)

CHILD AND OTHER(S) 2 (GO TO EG25OV)

EG25OV. How many children is this amount for, including (CHILD)?

**CPCSTHN1-
CPCSTHN4** NUMBER.....

*If EG2 = 1 (one center-based arrangement), ask EG26.
Else, if EG2 >= 2 (two or more center-based arrangements),
return to EG3 until the number of arrangements in EG2 are
completed, then ask EG26.*

EG26. Does (CHILD) go to another day care center, preschool, prekindergarten, or (Early) Head Start program?

*

YES 1 (GO TO EG3)
NO 2 (GO TO BOX BEFORE EH1)

(Early) Head Start

If ED1, EE1, and EG1 all = 2 (child has no current care arrangements), or arrangements do not occur at least once each week (ED5, EE5, EG6 = 2), go to EH3. Else, ask EH1.

EH1. (Early) Head Start is a federally sponsored preschool program primarily for children from low-income families. (Is this/Are any of (CHILD'S)) care arrangement(s) (Early) Head Start?

PCANYHD YES 1 (GO TO EH2)
NO 2 (GO TO EH3)

EH2. [Which arrangement(s) (is/are) (Early) Head Start?]

PCHDTP1- (ARRANGEMENT 1)..... (LOCATION; DAYS & HOURS/WEEK)
PCHDTP4 (ARRANGEMENT 2)..... (LOCATION; DAYS & HOURS/WEEK)
(ARRANGEMENT 3)..... (LOCATION; DAYS & HOURS/WEEK)
(ARRANGEMENT 4)..... (LOCATION; DAYS & HOURS/WEEK)

ARRANGEMENT NUMBERS ☐☐☐ (GO TO BOX)

*If cost for arrangement identified at EH2 NE -1, ask EH4.
Else, go to first box before EI1.*

EH3. Has (CHILD) ever attended (Early) Head Start in the past?

PCEVRHD YES 1 (GO TO 1ST BOX BEFORE EI1)
NO 2 (GO TO 1ST BOX BEFORE EI1)

EH4. (Early) Head Start is a federally funded program that usually has no cost for eligible participants. However, you mentioned that your household pays (COST/UNIT) for (ARRANGEMENT.) What is this fee for?

PCHDCOS1- CHILD IS NOT HEAD START ELIGIBLE BUT IS ENROLLED
PCHDCOS3 IN A HEAD START PROGRAM 1
FEE IS FOR DAYCARE BEFORE OR AFTER HEAD START 2
NOW SAYS IT IS NOT A HEAD START PROGRAM 3
NOW SAYS THERE IS NO FEE 4
OTHER 91
PCHOS1/R- SPECIFY _____
PCHOS4/R

*If more than one Head Start program, and Cost=Y, repeat
EH4 for each Head Start Program. Else go to EI1.*

Selection of Care and Difficulty Finding Care

If ED1, EE1, or EG1 = 1 (child currently participates in at least one arrangement), go to box. Else, go to EI3.

If there is only one arrangement, go to EI1.
Else, if there is more than one arrangement, select the arrangement with the most hours (to calculate average weekly hours for monthly arrangements, multiply number of weeks in care by number of hours per week in care and divide by 4) and go to EI1INTRO.
Else, if two arrangements are the same number of hours, CATI will select one and go to EI1 Intro.

EI1INTRO You said that (CHILD) receives care from ((HIS/HER) RELATIVE/a nonrelative/a program in (LOCATION)) for (NUMBER) hours per week, (NUMBER) days per week, and (NUMBER) weeks per month. Please respond to the next question thinking about that arrangement.

ARRGMOST

EI1. Parents select child care arrangements for a number of reasons. For each of the reasons I read, please tell me how important it was when you chose this arrangement for (CHILD). Please tell me whether it was not at all important, a little important, somewhat important, or very important to you.

NOT AT ALL IMPORTANT	A LITTLE IMPORTANT	SOMEWHAT IMPORTANT	VERY IMPORTANT
1	2	3	4

Rating

DLOCA	The location of the arrangement?	<input type="checkbox"/>
DCOST	The cost of the arrangement?	<input type="checkbox"/>
DRELY	The reliability of the arrangement?	<input type="checkbox"/>
DLERN	The learning activities at the arrangement?	<input type="checkbox"/>
DCHIL	(CHILD) spending time with other kids (his/her age)?	<input type="checkbox"/>
DHROP	The times during the day that this caregiver is able to provide care?	<input type="checkbox"/>
DNBGRP	The number of other children in (CHILD)'s care group?	<input type="checkbox"/>

EI2. How much difficulty did you have finding the type of child care or early childhood program you wanted for (CHILD)? Would you say...

PPDIFCLT

A lot,	1
Some,	2
A little,	3
No difficulty, or	4
Have you not found the child care or program you wanted?	5

<i>Ask EI3 only once per household.</i>

EI3. Do you feel there are good choices for child care or early childhood programs where you live?

PPCHOIC

YES	1
NO	2
HAVE NOT TRIED TO FIND CARE	3

Home Activities

EKINTRO. Now I'd like to talk with you about (CHILD)'s activities with family members in the past week.

EK1. How many times have you or someone in your family read to (CHILD) in the past week?
Would you say...

FOREADTO Not at all, 1 (GO TO BOX AFTER EK2)
Once or twice, 2 (GO TO EK2)
3 or more times, or 3 (GO TO EK2)
Every day? 4 (GO TO EK2)

EK2. About how many minutes (on each of those days/each day) do you or someone in your family read to (him/her)?
[IF TIME PER DAY VARIES, ASK FOR AVERAGE TIME PER DAY.]

FORDDAY MINUTES

<p><i>If PATH = I, and AGE2004 = 2, go to ELINTRO. Else, if PATH = N, ask EK 3. Else, go to PTINTRO.</i></p>
--

EK3. In the past week, has anyone in your family done the following things with (CHILD)?
[IF YES: Would you say one or two times, or three or more?]

		YES	NO		1-2 TIME	3+ TIMES
FOSTORY	a. Told (him/her) a story?	1	2		1	2
FOSTORYN						
FOWORDS	b. Taught (him/her) letters, words, or					
FOWORDSN	numbers?	1	2		1	2
FOMUSIC	c. Taught (CHILD) songs or music?	1	2		1	2
FOMUSICN						
FOCRAFTS	d. Worked on arts and crafts with					
FOCRAFTN	(him/her)?	1	2		1	2

EK4. In the past month, have you or someone in your family visited a library with (CHILD)?

FOLIBRAY YES 1
NO 2

Emerging Literacy and Numeracy

ELINTRO. These next questions are about things that different children do at different ages. These things may or may not be true for (CHILD).

EL1. Can (CHILD) identify the colors red, yellow, blue, and green by name? Would you say...

DPCOLOR All of them, 1
Some of them, or 2
None of them? 3

EL2. Can (he/she) recognize...

DPLETTER All of the letters of the alphabet, 1
Most of them, 2
Some of them, or 3
None of them? 4

EL3. How high can (CHILD) count? Would you say...

DPCOUNT Not at all, 1
Up to five, 2
Up to ten, 3
Up to twenty, 4
Up to fifty, or 5
Up to 100 or more? 6

EL4. Can (CHILD) write (his/her) first name, even if some of the letters are backwards?

DPNAME YES 1
NO 2

EL5. Is (CHILD) able to read story books on (his/her) own now?

HASTORY YES 1 (GO TO EL6)
NO 2 (GO TO EL7)

EL6. Does (CHILD) actually read the words written in the book, or does (he/she) look at the book and pretend to read?

HAWORDS READS THE WRITTEN WORDS 1 (GO TO PTINTRO)
PRETENDS TO READ 2 (GO TO EL8)
DOES BOTH 3 (GO TO PTINTRO)

EL7. (Although (CHILD) doesn't yet read story books on (his/her) own,) (Does/does) (he/she) ever look at a book with pictures and pretend to read?

HAPRETND YES 1 (GO TO EL8)
NO 2 (GO TO PTINTRO)

EL8. When (he/she) pretends to read a book, does it sound like a connected story, or does (he/she) tell what's in each picture without much connection between them?

HACONECT SOUNDS LIKE CONNECTED STORY 1
TELLS WHAT'S IN EACH PICTURE 2
DOES BOTH 3

Child Disability, Race, and Country of Origin (PATH=ALL)

PTINTRO. Now I have a few questions about (CHILD)'s health.

PT1. Has a doctor or other health professional ever told you that (CHILD) was developmentally delayed?

HDDELAY YES 1
NO 2

If PATH = 1, go to PT3. Else, ask PT2.

PT2. Has a health professional told you that (CHILD) has any of the following disabilities?
[RANDOM START; KEEP h, i, j, and k LAST.]

		YES	NO
HDLEARN	a. A specific learning disability?	1	2
HDRETARD	b. Mental retardation?	1	2
HDSPEECH	c. A speech or language delay?	1	2
HDISTRB	d. A serious emotional disturbance?	1	2
HDDEAFIM	e. Deafness or another hearing impairment?	1	2
HDBLNDIM	f. Blindness or another visual impairment?	1	2
HDORTHOP	g. An orthopedic impairment?	1	2
HD Autism	h. Autism?	1	2
HDADD	i. Attention deficit disorder, ADD, or ADHD?	1	2
HD PDD	j. Pervasive developmental disorder or PDD?	1	2
HDOTHER	k. Another health impairment lasting 6 months or more?	1	2

If any PT2a-k= 1, go to PT4. Else, go to PTBINTRO.

PT3. Has a health professional told you that (CHILD) has any of the following disabilities?
[RANDOM START; KEEP e LAST.]

		YES	NO
HDDEAFIM	a. Deafness or another hearing impairment?	1	2
HDBLNDIM	b. Blindness or another visual impairment?	1	2
HDORTHOP	c. An orthopedic impairment?	1	2
HDDEVEL	d. Severe developmental delay?	1	2
HDOTHER	e. Another health impairment lasting 6 months or more?	1	2

If any PT3a-e=1, go to PT4. Else, go to PTBINTRO.

PT4. Is (CHILD) receiving services for (his/her) (disability/disabilities) ...

		YES	NO
HDSCHL	a. From your local school district?	1	2
HGOVT	b. From a state or local health or social service agency?	1	2
HDOCTOR	c. From a doctor, clinic, or other health care provider?	1	2
HDSOURCE	d. From some other source?	1	2
HDSOUROS/R	What is that? _____		

<p><i>If PATH = N, S, H, or (PATH I and AGE2004=2) ask PT5. Else, go to PTBINTRO.</i></p>

PT5. (Does/Do) (CHILD)'s (disability/disabilities) affect (his/her) ability to learn?

HDAFFECT	YES.....	1
	NO.....	2

PTBINTRO. Now I have some questions about (CHILD)'s background.

PTB1. In what state, country, or territory was (CHILD) born?

CBORNUS	ONE OF THE 50 STATES OR THE DISTRICT OF COLUMBIA.....	1	(GO TO PTB2)
	ONE OF THE U.S. TERRITORIES [PUERTO RICO, GUAM, AMERICAN SAMOA, U.S. VIRGIN ISLANDS, MARIANA ISLANDS, MIDWAY ISLANDS, OR SOLOMON ISLANDS]	2	(GO TO PTB1OV)
CTERROS/R	SPECIFY _____		
CCONTOS/R	SOME OTHER COUNTRY?.....	3	(GO TO PTB1OV)
	SPECIFY _____		

PTB1OV. How old was (CHILD) when (he/she) first moved to the (United States/50 states or the District of Columbia)? [ROUND MONTHS OR FRACTIONS TO NEAREST YEAR.]

CMOVEAGE	AGE.....	<input type="text"/> <input type="text"/>
-----------------	----------	---

PTB2. Is (he/she) of Spanish, Hispanic, or Latino origin?

CHISPAN	YES	1
	NO.....	2

PTB3. What is (CHILD)'s race? You may name more than one. Is (he/she)...
 [IF "HISPANIC" PROBE "Is that White Hispanic, Black Hispanic, both, or something else?"]
 [CODE ALL THAT APPLY].

CWHITE	White,.....	1
CBLACK	Black or African American,	2
CAMIND	American Indian or Alaska Native,.....	3
CASIAN	Asian, or	4
CPACI	Native Hawaiian or other Pacific Islander?	5
CRACEOTH	OTHER RACE?	91
CRACEOS/R	SPECIFY _____	

<i>If AGE2004 >= 2, ask PTB4. Else, go to PARINTRO.</i>
--

PTB4. What language does (CHILD) speak most at home?

	ENGLISH	1
CSPEAK	SPANISH	2
	ENGLISH AND SPANISH EQUALLY	3
	ENGLISH AND ANOTHER LANGUAGE EQUALLY	4
CSPEAKOS/R	SPECIFY _____	
	CHILD DOESN'T SPEAK	5
	ANOTHER LANGUAGE	91
CSPEAKOS/R	SPECIFY _____	

Parent/Guardian Characteristics [PATH = ALL]

Mother Items

PARINTRO. These next questions are about parents or guardians who live with (CHILD).

Ask all parent/guardian characteristics (PUINTRO through PU20) once for their mother in the household. Except ask question PU19 for each sampled child when PATH = I, N, S or (PATH = H and HOMSCFLG = 1).

If there is no mother or father in the household but there are both a grandmother and a grandfather and one of the grandparents is the respondent, ask section PU about the grandmother (and section PV about the grandfather). Else, go to the next box.

If there are two mothers or two fathers, use the lowest value between MOMTYPE1 and MOMTYPE2 or DADTYPE1 and DADTYPE2 to select the subject of section PU or PV. If both same sex parents have the same value, choose MOMTYPE1 or DADTYPE1 as the subject of section PU or PV. Else, go to next box.

**If HHMOM = 1, 2, or 3 (mother or female guardian), go to PUINTRO. Else, if HHMOM = 4 (no mother/female guardian), go to first box before PVINTRO.*

PUINTRO. Let's start with (you/(CHILD)'s mother/grandmother/(NAME)).

PU1. [Are you/Is (CHILD'S) (mother/stepmother/foster mother/grandmother/(NAME))] currently...

MOMSTAT	Married,	1	(GO TO PU2)
	Separated,	2	(GO TO BOX)
	Divorced,	3	(GO TO BOX)
	Widowed, or	4	(GO TO BOX)
	Never married?	5	(GO TO BOX)

*If HHMOM is 1, then there is a birth or adoptive mother in the household. If HHMOM is 2, then there is a stepmother or foster mother, other parent/guardian, or female partner/girlfriend of parent in the household. If HHMOM is 3, then there is no mom or dad; there is a female respondent in the household.

If the only HH member other than the mother/grandmother who is age 16 or older is the subject child, autocode PU1OV = 2. Else, if any HH member has PA4 = 12, 13, 14 (same sex parent or female or male partner of parent/guardian) autocode PU1OV = 1. Else, if any HH member other than the mother/grandmother and other than the subject child is age 16 or older ask PU1OV. Else, go to PU2.

PU1OV. (Are you/Is she) currently living with a partner?

MOMLIVW YES 1
NO 2

PU2. How old (were you/was (CHILD)'s (mother/stepmother/foster mother/grandmother/(NAME)) when (you/she) first became a mother, stepmother, or guardian to any child?

MOMNEW YEARS OF AGE.....

PU3. What was the first language (you/(CHILD)'s (mother/stepmother/foster mother/grandmother/(NAME)) learned to speak?

MOMLANG ENGLISH 1 (AUTOCODE PU4=1 AND GO TO PU5)
SPANISH 2 (GO TO PU4)
ENGLISH AND SPANISH EQUALLY 3 (GO TO PU4)
ENGLISH AND ANOTHER LANGUAGE EQUALLY 4 (GO TO PU4)
SPECIFY _____
MOMLANOS/R ANOTHER LANGUAGE 91 (GO TO PU4)
SPECIFY _____

PU4. What language (do you/does she) speak most at home now?

MOMSPEAK ENGLISH 1
SPANISH 2
ENGLISH AND SPANISH EQUALLY 3
ENGLISH AND ANOTHER LANGUAGE EQUALLY 4
SPECIFY _____
(ENGLISH AND OTHER LANGUAGE SPECIFIED IN PU3 EQUALLY) 5
(OTHER LANGUAGE SPECIFIED IN PU3) 6
MOMSPEOS/R ANOTHER LANGUAGE 91
SPECIFY _____

PU5. In what state, country, or territory [were you/was (CHILD)'s (mother/stepmother/foster mother/grandmother/(NAME))] born?

MOMBORN ONE OF THE 50 STATES OR THE DISTRICT OF COLUMBIA..... 1 (GO TO PU6)
 ONE OF THE U.S. TERRITORIES [PUERTO RICO, GUAM,
 AMERICAN SAMOA, U.S. VIRGIN ISLANDS, MARIANA
 ISLANDS, MIDWAY ISLANDS, OR SOLOMON ISLANDS] 2 (GO TO PU5OV)
MOMTEROS/R SPECIFY _____
 SOME OTHER COUNTRY..... 3 (GO TO PU5OV)
MOMCONOS/R SPECIFY _____

PU5OV. How old (were you/was she) when (you/she) first moved to the (United States/50 states or the District of Columbia)?

MOMUSAGE AGE

PU6. What is the highest grade or year of school that (you/(CHILD)'s (mother/stepmother/foster mother/grandmother/(NAME))) completed?

MOMGRADE UP TO 8TH GRADE..... 1 (ENTER GRADE, GO TO PU7)
 9TH TO 11TH GRADE..... 2 (ENTER GRADE, GO TO PU7)
MOMGRAD1 12TH GRADE BUT NO DIPLOMA..... 3 (GO TO PU7)
MOMGRAD2 HIGH SCHOOL DIPLOMA/EQUIVALENT..... 4 (GO TO PU8)
 VOC/TECH PROGRAM AFTER HIGH SCHOOL
 BUT NO VOC/TECH DIPLOMA..... 5 (GO TO PU7)
 VOC/TECH DIPLOMA AFTER HIGH SCHOOL..... 6 (GO TO PU7)
 SOME COLLEGE BUT NO DEGREE 7 (GO TO PU6OV)
 ASSOCIATE'S DEGREE (AA, AS) 8 (GO TO PU7)
 BACHELOR'S DEGREE (BA, BS)..... 9 (GO TO PU8)
 GRADUATE OR PROFESSIONAL SCHOOL BUT NO DEGREE.... 10 (GO TO PU8)
 MASTER'S DEGREE (MA, MS)..... 11 (GO TO PU8)
 DOCTORATE DEGREE (PHD, EDD)..... 12 (GO TO PU8)
 PROFESSIONAL DEGREE BEYOND BACHELOR'S DEGREE
 (MEDICINE/MD; DENTISTRY/DDS; LAW/JD/LLB; ETC.)..... 13 (GO TO PU8)

PU6OV. Did (you/she) earn a vocational or technical diploma after leaving high school?

MOMVOTEC YES 1
 NO..... 2

PU7. (Do you/Does she) have a high school diploma or its equivalent, such as a GED?

MOMDIPL YES 1
 NO..... 2

PU8. During the past week, did (you/(CHILD)'s (mother/stepmother/foster mother/grandmother/(NAME)) work at a job for pay or income, including self-employment?

MOMWORK YES 1 (GO TO PU10)
 NO 2 (GO TO PU9)
 RETIRED 3 (GO TO PU13)
 DISABLED/UNABLE TO WORK..... 4 (GO TO PU13)

PU9. (Were you/Was she) on leave or vacation from a job during the past week?

MOMLEAVE YES 1 (GO TO PU10)
 NO 2 (GO TO PU13)

PU10. About how many total hours per week (do you/does she) usually work for pay or income, counting all jobs?
 [IF HOURS VARY, PROBE FOR AVERAGE PER WEEK.]

MOMHOURS WEEKLY HOURS

PU11. (Do you/Does she) work a regular day shift, that is, one with most of the hours between 6 am and 6 pm?

MOMRSFT YES 1 (GO TO PU13)
 NO 2 (GO TO PU12)

PU12. (Do you/Does she) work...

MOMVSFT A regular shift at times other than between 6 am
 and 6 pm, 1
 A variable shift—one that changes from days
 to evenings or nights, where (you/she) choose(s)
 your/her) own hours, 2
 A variable shift, with hours set by (your/her)
 employer? 3
 WORKS WHEN WORK IS AVAILABLE 4

PU13. In the past 12 months, how many months, [if any], (have you/has she) worked for pay or income?

MOMMTHS MONTHS

*If PU8 or PU9 = 1 (working or on leave/vacation), go to
 PU17. If PU8 =3 (retired), then autocode PU16 = 3
 (retired), and go to box after PU16. If PU8 = 4
 (disabled/unable to work), then autocode PU16 = 5
 (unable to work), and go to box after PU16. Else, ask
 PU14.*

PU14. (Have you/Has she) been actively looking for work in the past 4 weeks?

MOMLOOK YES 1 (GO TO PU15)
NO..... 2 (GO TO PU16)

PU15. What (have you/has she) been doing in the past 4 weeks to find work? (Have you/Has she)...

	YES	NO
MOMAGN a. Checked with an employment agency?	1	2
MOMEMPL b. Checked with employer directly or sent resume?	1	2
MOMREL c. Checked with friends or relatives?	1	2
MOMANSAD d. Placed or answered job ads?	1	2

If PU15 a-d NE 1 (not actively looking for work), go to PU16. Else, go to box after PU16.

PU16. What (were you/was she) doing most of last week? Would you say...

MOMACTY Keeping house or caring for children or
other dependents, 1
Going to school, 2
Retired, 3
Volunteering 4
Unable to work, or 5
Something else? 91

MOMACTOS/R What was that? _____

If PU16 = 2, autocode PU17 = 1 and go to PU18. Else, ask PU17.

PU17. (Are you/is (CHILD)'s (mother/stepmother/foster mother/grandmother/(NAME)) attending or enrolled in a school, college, university, or adult learning center, or receiving vocational education or job training [other than at (your/her) regular job]?

MOMENROL YES 1 (GO TO PU18)
NO..... 2 (GO TO BOX BEFORE PU19)

PU18. How many hours each week (do you/does she) attend school or training? [REFERS TO ACTUAL TIME, NOT CREDIT HOURS.]

MOMENHRS WEEKLY HOURS □□

*If (PU8 = 1 or PU9 = 1), and(PATH = I, N S, or (PATH = H and HOMSCFLG = 1)) (working or on leave/vacation and child is not homeschooled only)ask PU19.
Else, go to first box before PVINTRO.*

PU19. Have (CHILD)'s (child/after-school) care needs influenced [your/(his/her) (mother/stepmother/foster mother/grandmother)/(NAME))'s] choice of a job or work schedule in any way?

MOMCHOIC

YES 1
NO 2

Ask PU20 only once per mother per household.

PU20. How easy is it for (you/her) to leave work if (CHILD/one of your children/one of her children) gets sick or needs (you/her) unexpectedly? Would you say...

MOMLVEAS

[VERY] Easy, 1
Somewhat easy, 2
Not very easy, or 3
Difficult? 4

Father Items

Ask all parent/guardian characteristics (PVINTRO through PV20) once per father in the household. Except ask question PV19 for each sampled child when PATH = I, N, S or (PATH = H and HOMSCFLG = 1).

If there is no mother or father in the household but there are both a grandmother and a grandfather and one of the grandparents is the respondent, ask section PV about the grandfather. Else, go the next box.

If there are two fathers, use the lowest value between DADTYPE1 and DADTYPE2 to select the subject of section PV. If both same sex parents have the same value, choose DADTYPE1 as the subject of section PV. Else, go to next box.

**If HHDAD = 1, 2, or 3 (father or male guardian), go to PVINTRO.
Else, if HHDAD = 4 (no father or male guardian), go to PWINTRO.*

PVINTRO. Let's talk about [you/ (CHILD'S) (father/stepfather/foster father/grandfather/(NAME))].

PV1. [Are you/Is (CHILD'S) (father/stepfather/foster father/grandfather/(NAME))] currently...

DADSTAT	Married,	1	(GO TO PV3)
	Separated,	2	(GO TO BOX)
	Divorced,	3	(GO TO BOX)
	Widowed, or	4	(GO TO BOX)
	Never married?	5	(GO TO BOX)

If the only HH member other than the father/grandfather who is age 16 or older is the subject child, autocode PV2 = 2. Else, if any HH member has PA4 = 12, 13, 14 (same sex parent or female or male partner of parent/guardian) autocode PV2 = 1. Else, if any HH member other than the father/grandfather and other than the subject child is age 16 or older ask PV2. Else, go to PV3.

*If HHDAD is 1, then there is a birth or adoptive father in the household. If HHDAD is 2, then there is a stepfather or foster father, other parent/guardian, or male partner/boyfriend of parent in the household. If HHDAD is 3, then there is no mom or dad; there is a male respondent in the household.

PV2. (Are you/Is he) currently living with a partner?

DADLIVW YES 1
NO 2

PV3. What was the first language (you/(CHILD)'s (father/stepfather/foster father/grandfather/(NAME)) learned to speak?

DADLANG ENGLISH 1 (AUTOCODE PV4=1 AND GO TO PV5)
SPANISH 2 (GO TO PV4)
ENGLISH AND SPANISH EQUALLY 3 (GO TO PV4)
ENGLISH AND ANOTHER LANGUAGE EQUALLY 4 (GO TO PV4)
SPECIFY _____
ANOTHER LANGUAGE 91 (GO TO PV4)
DADLANOS/R SPECIFY _____

PV4. What language (do you/does he) speak most at home now?

DADSPEAK ENGLISH 1
SPANISH 2
ENGLISH AND SPANISH EQUALLY 3
ENGLISH AND ANOTHER LANGUAGE EQUALLY 4
SPECIFY _____
(ENGLISH AND OTHER LANGUAGE SPECIFIED IN PV3 EQUALLY) 5
(OTHER LANGUAGE SPECIFIED IN PV3) 6
ANOTHER LANGUAGE 91
DADSPEOS/R SPECIFY _____

PV5. In what state, country, or territory (were you/was (CHILD)'s father/stepfather/foster father/grandfather/was (NAME)) born?

DADBORN ONE OF THE 50 STATES OR THE DISTRICT OF COLUMBIA 1 (GO TO PV6)
ONE OF THE U.S. TERRITORIES [PUERTO RICO, GUAM, AMERICAN SAMOA, U.S. VIRGIN ISLANDS, MARIANA ISLANDS, MIDWAY ISLANDS, OR SOLOMON ISLANDS] 2 (GO TO PV5OV)
DADTEROS/R SPECIFY _____
SOME OTHER COUNTRY 3 (GO TO PV5OV)
DADCONOS/R SPECIFY _____

PV5OV. How old (were you/was he) when (you/he) first moved to the (United States/50 states or the District of Columbia)?

DADUSAGE AGE

PV6. What is the highest grade or year of school that (you/(CHILD)'s (father/stepfather/foster father/grandfather(NAME)) completed?

DADGRADE UP TO 8TH GRADE..... 1 (ENTER GRADE, GO TO PV7)
 9TH TO 11TH GRADE..... 2 (ENTER GRADE, GO TO PV7)
DADGRAD1 12TH GRADE BUT NO DIPLOMA..... 3 (GO TO PV7)
DADGRAD2 HIGH SCHOOL DIPLOMA/EQUIVALENT..... 4 (GO TO PV8)
 VOC/TECH PROGRAM AFTER HIGH SCHOOL
 BUT NO VOC/TECH DIPLOMA 5 (GO TO PV7)
 VOC/TECH DIPLOMA AFTER HIGH SCHOOL..... 6 (GO TO PV7)
 SOME COLLEGE BUT NO DEGREE 7 (GO TO PV6OV)
 ASSOCIATE'S DEGREE (AA, AS) 8 (GO TO PV7)
 BACHELOR'S DEGREE (BA, BS)..... 9 (GO TO PV8)
 GRADUATE OR PROFESSIONAL SCHOOL BUT NO DEGREE.... 10 (GO TO PV8)
 MASTER'S DEGREE (MA, MS)..... 11 (GO TO PV8)
 DOCTORATE DEGREE (PHD, EDD)..... 12 (GO TO PV8)
 PROFESSIONAL DEGREE BEYOND BACHELOR'S DEGREE
 (MEDICINE/MD; DENTISTRY/DDS; LAW/JD/LLB; ETC.)..... 13 (GO TO PV8)

PV6OV. Did (you/he) earn a vocational or technical diploma after leaving high school?

DADVOTEC YES 1
 NO..... 2

PV7. (Do you/Does he) have a high school diploma or its equivalent, such as a GED?

DADDIPL YES 1
 NO..... 2

PV8. During the past week, did (you/(CHILD)'s (father/stepfather/foster father/grandfather/(NAME)) work at a job for pay or income, including self-employment?

DADWORK YES 1 (GO TO PV10)
 NO..... 2 (GO TO PV9)
 RETIRED 3 (GO TO PV13)
 DISABLED/UNABLE TO WORK..... 4 (GO TO PV13)

PV9. (Were you/Was he) on leave or vacation from a job during the past week?

DADLEAVE YES 1 (GO TO PV10)
 NO..... 2 (GO TO PV13)

PV10. About how many total hours per week (do you/does he) usually work for pay or income, counting all jobs?

[IF HOURS VARY, PROBE FOR AVERAGE PER WEEK.]

DADHOURS WEEKLY HOURS.....□□

PV11. (Do you/Does he) work a regular day shift, that is, one with most of the hours between 6 am and 6 pm?

DADRSFT YES 1 (GO TO PV13)
NO 2 (GO TO PV12)

PV12. (Do you/Does he) work...

DADVSFT A regular shift at times other than between 6 am
and 6 pm, 1
A variable shift—one that changes from days
to evenings or nights, where (you/he) choose(s)
your/his) own hours, 2
A variable shift, with hours set by (your/his)
employer? 3
WORKS WHEN WORK IS AVAILABLE 4

PV13 In the past 12 months, how many months, [if any], (have you/has he) worked for pay or income?

DADMTHS MONTHS

If PV8 or PV9 = 1 (working or on leave/vacation), go to PV17. If PV8 = 3 (retired), then autocode PV16 = 3 (retired), and go to the box before PV17. If PV8 = 4 (disabled/unable to work), then autocode PV16 = 5 (unable to work), and go to the box before PV17. Else, ask PV14.

PV14. (Have you/Has he) been actively looking for work in the past 4 weeks?

DADLOOK YES 1 (GO TO PV15)
NO 2 (GO TO PV16)

PV15. What (have you/has he) been doing in the past 4 weeks to find work? (Have you/Has he)...

	YES	NO
DADAGN a. Checked with an employment agency.....	1	2
DADEEMPL b. Checked with employer directly or sent resume.....	1	2
DADREL c. Checked with friends or relatives.....	1	2
DADANSAD d. Placed or answered job ads	1	2

If PV15 a-d NE 1 (not actively looking for work), go to PV16. Else, go to box after PV16.

PV16. What (were you/was he) doing most of last week? Would you say...

DADACTY Keeping house or caring for children or
other dependents, 1
Going to school, 2
Retired, 3
Volunteering 4
Unable to work, or 5
Something else? 91
DADACTOS/R What was that? _____

*If PV16 = 2, then autocode PV17 = 1, and go to PV18.
Else, ask PV17.*

PV17. (Are you/is (CHILD)'s (father/stepfather/foster father/grandfather/(NAME)) attending or enrolled in a school, college, university, or adult learning center, or receiving vocational education or job training [other than at (your/his) regular job]?)

DADENROL YES 1 (GO TO PV18)
NO 2 (GO TO BOX BEFORE PV19)

PV18. How many hours each week (do you/does he) attend school or training? [REFERS TO ACTUAL TIME, NOT CREDIT HOURS]

DADENHRS WEEKLY HOURS

*If (PV8 = 1 or PV9 = 1), and(PATH = I, N S, or (PATH = H and
HOMSCFLG = 1)) (working or on leave/vacation and child is not
homeschooled only), ask PV19.
Else, go to box before PWINTRO.*

PV19. Have (CHILD)'s (child/after-school) care needs influenced [your/(his/her) (father/stepfather/foster father/ grandfather/(NAME))'s] choice of a job or work schedule in any way?

DADCHOIC YES 1
NO 2

Ask PV20 once per father per household.

PV20. How easy is it for (you/him) to leave work if (CHILD/one of your children/one of his children) gets sick or needs (you/him) unexpectedly? Would you say...

DADLVEAS [VERY] Easy, 1
Somewhat easy, 2
Not very easy, or 3
Difficult? 4

Household Characteristics [PATH = ALL]

The following questions are asked only once per household.

PWINTRO. Now, a few questions about your household.

If PU8=1 or PU9=1 (mother works, on leave/vacation) and PV8=1 or PV9=1 (father works, on leave/vacation) and ED1, EE1, & EG1 = 2 (no child care arrangements), then ask PW1. Else ask PW2.

PW1. (Do you and (CHILD'S)(OTHER PARENT/GUARDIAN)/Do (CHILD'S) parent's) arrange your work schedules so that a parent is available to care for [(CHILD)/the children]?

HWKSKED YES 1
NO 2

PW2. (Do you/Does anyone in your household) work for a child care center?

CNTRWORK YES 1
NO 2

PW3. (Do you/Do any adults or teenagers in your household) care for or baby-sit someone else's child or children on a regular basis, either in your home or someone else's home?

Please do not include occasional babysitting.

CHCRWORK YES 1
NO 2

PW4. Do you...

HOWNHOME Own your home, 1
Rent your home, or 2
Have some other arrangement? 3

PW5. Besides (PHONE NUMBER), do you have other telephone numbers in your household, not including cellular phones?

* YES 1 (GO TO PW7)
NO 2 (GO TO PW8)
NOT MY NUMBER 3 (GO TO PW6)

PW6. [INTERVIEWER: ASK FOR AND RECORD THE TELEPHONE NUMBER REACHED. RECORD REASON FOR REACHING DIFFERENT TELEPHONE NUMBER.]

* TELEPHONE NUMBER REACHED _____

AREA CODE CHANGE1
 OTHER NUMBER IN HOUSEHOLD2
 ORIGINAL NUMBER IS THAT OF ANOTHER HOUSEHOLD AND
 NUMBER IS BEING FORWARDED TO THIS HOUSEHOLD3
 NEVER HEARD OF ORIGINAL NUMBER4
 OTHER [RECORD EXPLANATION IN COMMENTS]5

If PW6 = 3, go to CLOSE2. Else, for cases where PW5 = 3 (not number dialed), ask PW5 again with new number.

PW7. How many of these additional telephone numbers are for home use, not including cellular phones?

HNUMUSE NUMBER..... ☐ ☐ (GO TO BOX)

*If PW7 > 0 (other telephone numbers for home use), go to PW9.
Else, go to PW8.*

PW8. Besides this phone number, do you have any telephone numbers in your household that are used for computer or fax lines?

* YES1 (GO TO PW9)
 NO2 (GO TO PW12)

PW9. How many of these additional telephone numbers are used for computer or fax lines?

* NUMBER..... ☐ ☐ (GO TO PW10)

If PW9 = 0, go to PW12. Else, ask PW10.

PW10. Some households have telephone numbers that are used both for talking and for computer or fax lines. (Is the number/Are any of the numbers) used for (a) computer or fax line(s) ever answered for talking?

* YES1 (GO TO BOX)
 NO2 (GO TO PW12)

If PW9 = 1 (only 1 other telephone number for computer or fax), autocode PW11= 1, and go to PW12. Else, ask PW11.

PW11. How many computer or fax telephone numbers are also answered for talking?

* NUMBER..... ☐☐

PW12. So that we can group households geographically, may I have your ZIP code?

STFZIP/R ZIP CODE ☐☐☐☐☐

PW13. Are there any conditions in your neighborhood that make you worried about the health or safety of ((CHILD)/any of the children in your household)?

HNEIGHB YES 1
NO 2

*If number of children in the household age 15 or younger = 1
and if all of RCFEE, NCFEE, and CPFEE NE 1, then autocode
PW14 = 2 and go to PW15. Else ask PW14.*

PW14. Is a state government or welfare agency currently helping you pay for any child care costs (for any child)?

HGOVCUR YES 1
NO 2

PW15. In the past 3 years, that is, since (DATE), has your family received benefits from Temporary Assistance for Needy Families, or TANF?

HTANF3YR YES 1
NO 2

PW16. In the past 3 years, that is, since (DATE), has your family received benefits from (STATE WELFARE PROGRAM)?

HWELF3YR YES 1
NO 2

*If PW15 =2 (no TANF in past 3 years) autocode PW17a=2. If
PW16=2 (no state welfare in past 3 years), autocode PW17b
=2 and go to PW17c. Else, ask PW17a-f.*

PW17. In the past 12 months, that is since (CURRENT MONTH) of 2004, has your family received benefits from any of the following programs? How about...

	YES	NO
HWELFTAN a. Temporary Assistance for Needy Families, or TANF?	1	2
HWELFADC b. Your (STATE WELFARE PROGRAM)	1	2
HWIC c. Women, Infants, and Children, or WIC?	1	2
HFOODST d. Food Stamps?.....	1	2
HMEDIC e. Medicaid or (STATE MEDICAID PROGRAM)?	1	2
HCHIP f. Child Health Insurance Program or (STATE CHIP PROGRAM)?	1	2

PW18. In studies like this, households are sometimes grouped according to income. What was the total income of all persons in your household over the past year, including salaries or other earnings, interest, retirement, and so on for all household members?

Was it...

HINCMRNG \$25,000 or less, or	1	(READ SET 1)
More than \$25,000?	2	(GO TO PW19)

PW19. Was it...

HINCM50K \$50,000 or less, or	1	(READ SET 2)
More than \$50,000?	2	(READ SET 3)

Was it...

[SET 1]

HINCOME \$5,000 or less	1
\$5,001 to \$10,000	2
\$10,001 to \$15,000	3
\$15,001 to \$20,000, or	4
\$20,001 to \$25,000?	5

[SET 2]

\$25,001 to \$30,000	6
\$30,001 to \$35,000	7
\$35,001 to \$40,000	8
\$40,001 to \$45,000, or	9
\$45,001 to \$50,000	10

[SET 3]

\$50,001 to \$60,000,	11
\$60,001 to \$75,000,	12
\$75,001 to \$100,000, or	13
Over \$100,000?	14

CLOSE1. Thank you, but we are only asking about children in a specific age or grade range. Please hold on for a moment while I check to see if there is anyone else I need to ask you about or anyone else I need to speak with. [IF NOT, THANK RESPONDENT]

CLOSE2. Those are all the questions I have about (CHILD). Please hold on for a moment while I check to see if there is anyone else I need to ask about or anyone else I need to speak with. [IF NOT, THANK RESPONDENT]

This page is intentionally blank.

NHES:2005 AFTER-SCHOOL PROGRAMS AND ACTIVITIES INTERVIEW

Section	Page
PA. Age and Relationship to Household Members	A-67
PB. Current School Status	A-71
SD. School Characteristics	A-74
SE. Student Academic Performance and Behavior	A-77
SF-SM. After-School Arrangements	A-79
SF. Relative Care	A-79
SG. Nonrelative Care	A-84
SH. Center-Based Programs	A-89
SI. After-School Activities	A-95
SJ. Self Care	A-98
SL. Alternative Arrangements	A-100
SK. Parental Care	A-101
SM. Selecting and Difficulty Finding After-School Care	A-102
PT. Child Disability, Race, and Country of Origin	A-104
PU-PV. Parent/Guardian Characteristics	A-107
PU. Mother Items	A-107
PV. Father Items	A-113
PW. Household Characteristics	A-118

This page is intentionally blank.

After-School Programs and Activities Interview

INTRO. [IF R WAS NOT SCREENER R AND THIS IS THE FIRST OR ONLY INTERVIEW FOR R: Hello, this is (INTERVIEWER). I'm calling for the U.S. Department of Education. We are conducting a voluntary and confidential national study about the educational experiences of children.]

I'd like to talk with you now about (CHILD). The interview is estimated to take (15/10) minutes or less.

Age and Relationship to Household Members

PA1. First, I'd like to confirm (CHILD)'s age. In what month and year was (he/she) born?

MONTH

YEAR

CDOBMM
CDOBY

1	JANUARY	7	JULY
2	FEBRUARY	8	AUGUST
3	MARCH	9	SEPTEMBER
4	APRIL	10	OCTOBER
5	MAY	11	NOVEMBER
6	JUNE	12	DECEMBER

*Calculate AGE2004 = child's age on December 31, 2004.
Calculate current age for display in PA2. If current age does not match screener age or birth month is current month, ask PA2. Else, go to box after PA2.*

PA2. That would mean that (CHILD) [is (AGE)/turns or turned (AGE) this month]. Is that right?

*

YES 1 (GO TO BOX)
NO 2 (RETURN TO PA1)

If child was born after December 31, 2004, or AGE2004 > 15, go to CLOSE1. Else, go to next box.

*If the screener R is the MKR and the whole household was enumerated in the screener (HHADULT=1,) go to RELINTRO.
Else, if this is interview for CHILD2 or CHILD3, go to RELINTRO. Else, if this is interview for CHILD1, go to PA3.*

NOTE: Response categories shown in mixed upper and lower case are read to the respondent by the interviewer. Those shown in upper case are not read.

Variables designated by /R appear only on the restricted-use data file. Those designated by * do not appear on either the public-use or the restricted-use data files. They were used for administrative, verification, or coding purposes only.

PA3. [SCREENER WAS COMPLETED ON (DATE)]
Now I'd like to ask about all the people who live in your household with (CHILD). First, I need to verify the names and ages of all the people (you told me about earlier/ who are already listed on my computer screen).

[What is (your first name/the first name of the next person?)]	[How old (are you/is (he/she))]?	[Is this person male or female?]	D TO DELETE
*	AGE1-AGE7	SEX1-SEX7	*

If adult in household was sampled for adult interview, go to PA3VER2. Else, go to PA3VER1.

PA3VER1. [AFTER VERIFICATION COMPLETE]
Now, please tell me the first names and ages of all other people who normally live in your household.

PA3VER2. I have listed (NUMBER) people in your household. Have we missed anyone who usually lives here who is temporarily away from home or living in a dorm at school, or any babies or small children?

MATRIX CORRECT.....1
RETURN TO MATRIX2
GO TO RESULT3

RELINTRO. Now I'd like to ask how all the people in your household are related to (CHILD).

If there is more than one child sampled in the household and they are siblings (RELATION [n]= 3,4) or cousins (RELATION[n]= 9), autocode the relationship (appropriately by sex for siblings) during the second or third child's interview and do not ask how CHILD1 is related to CHILD2 or CHILD3. If the respondent is the child's mother/father or same sex parent (S15 = 1, 2, or 12), copy relationship from Screener into RELATN[n] and ask PA5/PA6, then ask PA4 for every other household member. If respondent is not the child's mother/father, copy relationship from Screener into RELATN[n] and ask PA4 for every other household member.

PA4. How is (PERSON) related to (CHILD)? [VERIFY IF KNOWN.]

**RELATN1-
RELATN7**

MOTHER (BIRTH/ADOPTIVE/STEP/FOSTER)	1	(GO TO PA5)
FATHER (BIRTH/ADOPTIVE/STEP/FOSTER)	2	(GO TO PA6)
BROTHER, INCLUDING STEP, ADOPTED, AND FOSTER	3	(GO TO BOX AFTER PA6)
SISTER, INCLUDING STEP, ADOPTED, AND FOSTER	4	(GO TO BOX AFTER PA6)
GRANDMOTHER	5	(GO TO BOX AFTER PA6)
GRANDFATHER	6	(GO TO BOX AFTER PA6)
AUNT	7	(GO TO BOX AFTER PA6)
UNCLE	8	(GO TO BOX AFTER PA6)
COUSIN	9	(GO TO BOX AFTER PA6)
OTHER RELATIVE	10	(GO TO BOX AFTER PA6)

**RELTOS1/R-
RELTOS7/R**

SPECIFY _____		
NONRELATIVE	11	(GO TO BOX AFTER PA6)
SPECIFY _____		
SAME SEX PARENT	12	(GO TO BOX)
GIRLFRIEND OR FEMALE PARTNER OF (CHILD)'S PARENT/ GUARDIAN	13	(GO TO 2 ND BOX)
BOYFRIEND OR MALE PARTNER OF (CHILD)'S PARENT/ GUARDIAN	14	(GO TO 2 ND BOX)

If PA4 = 12 and sex=female (same sex parent/mother) go to PA5. If PA4 = 12 and sex = male (same sex parent/father), go to PA6. Ask PA4 for every other household member.

If PA4=13, autocode PA5=6. If PA4=14, autocode PA6=6. Else, ask PA5 for female parent/guardian(s) and PA6 for male parent/guardian(s). Then go to box after PA6.

PA5. [Are you/Is (PERSON)] (CHILD)'s ...

MOMTYPE1	Birth mother,	1
MOMTYPE2	Adoptive mother,	2
	Stepmother,	3
	Foster mother, or	4
	Other parent or guardian?	5
	FEMALE PARTNER OF PARENT	6

PA6. [Are you/Is (PERSON)] (CHILD)'s...

DADTYPE1	Birth father,	1
DADTYPE2	Adoptive father,	2
	Stepfather,	3
	Foster father, or	4
	Other parent or guardian?	5
	MALE PARTNER OF PARENT	6

If more than one mother or father, use lowest value between MOMTYPE1 and MOMTYPE2 or DADTYPE1 and DADTYPE2. If both same sex parents have the same value Choose MOMTYPE1 or DADTYPE1 for HHMOM or HHDAD.

Set HHMOM:

1 = birth/adoptive mother in household. 2 = step or foster mother, other parent/guardian, female partner of parent.

3 = no mom

and no dad, female R. 4 = else.

SET HHDAD:

1 = birth/adoptive father in household. 2 = step or foster father, other parent/guardian, male partner of parent. 3

= no mom

and no dad, male R. 4 = else.

Current School Status

If ECPP/ASPA Interview respondent was also the Screener respondent, copy responses to PB1 through PB7, and then go to box after PB7. Else, go to next box.

If AGE2004 >= 3, ask PB1. Else, go to box after PB7.

PB1. Now I'd like to talk with you about (CHILD)'s school experiences. Is (CHILD) attending (or enrolled in) (school/preschool, kindergarten, or school)?

ENROLL YES 1 (GO TO BOX)
NO..... 2 (GO TO BOX)

If AGE2004 >= 5, ask PB2. Else, if AGE2004 = 3 or 4 and PB1 = 1 (enrolled), go to PB6. Else, if AGE2004 = 3 or 4 and PB1 = 2 (not enrolled) go to box after PB7.

PB2. Some parents decide to educate their children at home rather than send them to school. Is (CHILD) being schooled at home?

HOMESCHL YES 1 (GO TO PB3)
NO..... 2 (GO TO 2ND BOX AFTER PB5)

PB3. So (CHILD) is being schooled at home instead of at school for at least some classes or subjects?

* YES 1 (GO TO PB4)
NO 2 (AUTOCODE PB2=2 AND GO TO 2ND BOX AFTER PB5)

PB4. Is (CHILD) getting all of (his/her) instruction at home, or is (he/she) getting some at school and some at home?

HOMEALL ALL AT HOME 1 (GO TO PB7)
SOME AT SCHOOL & SOME AT HOME 2 (GO TO PB5)

PB5. How many hours each week does (CHILD) usually go to a school for instruction? Please do not include time spent in extracurricular activities.

HOMSCHR HOURS (GO TO 1ST BOX BELOW)

If PB5 >= 9 hours, then set HOMSCFLG = 1 (homeschooler attends a school for at least 9 hours per week). Else, HOMSCFLG= -1. Then, go to PB7.

If PB1 = 1 (enrolled) and (PB2 NE 1 or PB3 NE 1 (not in home school)), ask PB6. Else, if AGE2004 = 5 or 6 and PB1 = 2 (not enrolled) and (PB2 NE 1 or PB3 NE 1 (not in home school)), go to box after PB7. Else, if AGE2004= > 7 and PB1 = 2 (not enrolled) and (PB2 NE 1 or PB3 NE 1 (not in home school)), go to CLOSE1.

PB6. What grade or year is (CHILD) attending?
[PROBE FOR T OR P: Is that before or after kindergarten?]

GRADE	NURSERY/PRESCHOOL/PREKINDERGARTEN/HEAD START	N	(GO TO FIRST BOX AFTER PB7)
	TRANSITIONAL KINDERGARTEN (BEFORE K).....	T	(GO TO FIRST BOX AFTER PB7)
	KINDERGARTEN	K	(GO TO FIRST BOX AFTER PB7)
	PREFIRST GRADE (AFTER K).....	P	(GO TO FIRST BOX AFTER PB7)
	FIRST GRADE	1	(GO TO FIRST BOX AFTER PB7)
	SECOND GRADE	2	(GO TO FIRST BOX AFTER PB7)
	THIRD GRADE	3	(GO TO FIRST BOX AFTER PB7)
	FOURTH GRADE.....	4	(GO TO FIRST BOX AFTER PB7)
	FIFTH GRADE.....	5	(GO TO FIRST BOX AFTER PB7)
	SIXTH GRADE	6	(GO TO FIRST BOX AFTER PB7)
	SEVENTH GRADE	7	(GO TO FIRST BOX AFTER PB7)
	EIGHTH GRADE	8	(GO TO FIRST BOX AFTER PB7)
	NINTH GRADE/FRESHMAN.....	9	(GO TO CLOSE1)
	TENTH GRADE/SOPHOMORE.....	10	(GO TO CLOSE1)
	ELEVENTH GRADE/JUNIOR.....	11	(GO TO CLOSE1)
	TWELFTH GRADE/SENIOR.....	12	(GO TO CLOSE1)
	ABOVE TWELFTH GRADE	13	(GO TO CLOSE1)
	UNGRADED	U	(GO TO PB7)
	SPECIAL EDUCATION.....	S	(GO TO PB7)

[IF T: In this interview we will be referring to that as "kindergarten."
IF P: In this interview, we will be referring to that as "prefirst grade."]

PB7. (What grade would (CHILD) have been in if (he/she) were attending (school/a school with regular grades/
What grade or year is (CHILD) attending)?
[PROBE FOR T OR P: Is that before or after kindergarten?]

GRADEEQ	NURSERY/PRESCHOOL/PREKINDERGARTEN/HEAD START	N	(GO TO BOX)
	TRANSITIONAL KINDERGARTEN (BEFORE K).....	T	(GO TO BOX)
	KINDERGARTEN.....	K	(GO TO BOX)
	PREFIRST GRADE (AFTER K).....	P	(GO TO BOX)
	FIRST GRADE	1	(GO TO BOX)
	SECOND GRADE	2	(GO TO BOX)
	THIRD GRADE	3	(GO TO BOX)
	FOURTH GRADE.....	4	(GO TO BOX)
	FIFTH GRADE.....	5	(GO TO BOX)
	SIXTH GRADE	6	(GO TO BOX)
	SEVENTH GRADE	7	(GO TO BOX)
	EIGHTH GRADE	8	(GO TO BOX)
	NINTH GRADE/FRESHMAN.....	9	(GO TO CLOSE1)
	TENTH GRADE/SOPHOMORE	10	(GO TO CLOSE1)
	ELEVENTH GRADE/JUNIOR.....	11	(GO TO CLOSE1)
	TWELFTH GRADE/SENIOR	12	(GO TO CLOSE1)
	ABOVE TWELFTH GRADE	13	(GO TO CLOSE1)
	UNGRADED, NO EQUIVALENT	U	(GO TO BOX)

[IF T: In this interview we will be referring to that as "kindergarten."

IF P: In this interview, we will be referring to that as "prefirst grade."]

Set PATH:

I = AGE2004 = 0, 1, 2 (**Infants/Toddlers**)

N = [(AGE2004 >= 3 and AGE2004 <= 6) and PB1 = 2 (not enrolled) and
(PB2 NE 1 (not in home school) or PB3 NE 1)] or [PB6/PB7
(grade/equivalent) = N] or [PB7 (grade equivalent) = U and AGE2004
= 3 or 4] (**Preschoolers**)

S = [PB6/PB7 (grade/equivalent) = T, K, P (kindergarten) or 1, 2, 3, 4, 5,
6, 7, or 8 and (PB2 NE 1 or PB3 NE 1 (not in home school))] or [PB7
(grade equivalent) = U and AGE2004 >= 5 and <= 15 and (PB2 NE 1
or PB3 NE 1 (not in home school))] (**School-age**)

H= AGE2004 >= 5 and (PB2 = 1 and PB3 = 1 (home school)) and PB7
(grade equivalent) NE N (**Home schoolers**)

*If PATH = I or N, go to ECPP interview EDINTRO. If PATH = S, go to ASPA
interview SD1. If PATH = H, and HOMSCFLG = 1, go to ASPA
interview SD1. If PATH = H, and HOMSCFLG = -1 go to PTINTRO.*

School Characteristics [PATH = S, H (HOMSCFLG = 1)]

If PATH S (or PATH H and HOMSCFLG = 1) go to next box. Else, go to PTINTRO.

If this is the interview for CHIL2 and SD9 = 1 in CHIL1's interview (both children attend same school) and respondent is the same for both interviews, copy responses to SD1 through SD8 from CHIL1's interview to CHIL2's interview and go to box before SEINTRO. Else, go to SD1.

SD1. Next let's talk about the school (CHILD) (goes to now/attends for some of (his/her) classes.) Does (he/she) go to a public or private school?

SPUBLIC PUBLIC..... 1 (GO TO SD2)
PRIVATE..... 2 (GO TO SD4)

SD2. Is it (his/her) regularly assigned school or a school that you chose?

SCHOICE ASSIGNED 1 (GO TO SD6)
CHOSEN..... 2 (GO TO SD3)
ASSIGNED SCHOOL IS SCHOOL OF CHOICE..... 3 (GO TO SD6)

SD3. Is (his/her) school in your assigned school district?

SDISRCT YES 1 (GO TO SD6)
NO..... 2 (GO TO SD6)

SD4. Is the school church-related or not church-related?

SRELGN CHURCH-RELATED 1 (GO TO SD5)
NOT CHURCH-RELATED 2 (GO TO SD6)

SD5. Is it a Catholic school?

SCATHLIC YES 1 (GO TO SD6)
NO..... 2 (GO TO SD6)

SD6. What is the lowest grade taught at (CHILD)'s school?

SLOW

NURSERY/PRESCHOOL/PREKINDERGARTEN/HEAD STARTN
 TRANSITIONAL KINDERGARTEN (BEFORE K) T
 KINDERGARTENK
 PREFIRST GRADE (AFTER K) P
 FIRST GRADE 1
 SECOND GRADE 2
 THIRD GRADE 3
 FOURTH GRADE 4
 FIFTH GRADE 5
 SIXTH GRADE 6
 SEVENTH GRADE 7
 EIGHTH GRADE 8

SD7. What is the highest grade taught at (his/her) school?

SHIGH

TRANSITIONAL KINDERGARTEN (BEFORE K) T
 KINDERGARTENK
 PREFIRST GRADE (AFTER K) P
 FIRST GRADE 1
 SECOND GRADE 2
 THIRD GRADE 3
 FOURTH GRADE 4
 FIFTH GRADE 5
 SIXTH GRADE 6
 SEVENTH GRADE 7
 EIGHTH GRADE 8
 NINTH GRADE/FRESHMAN 9
 TENTH GRADE/SOPHOMORE 10
 ELEVENTH GRADE/JUNIOR 11
 TWELFTH GRADE/SENIOR 12

SD8. At what time does (his/her) school usually let out?

SENDHR

HOUR.....☐☐

SENDMN

MINUTE☐☐

SENDAMPM

AM 1
 PM 2

If this is the interview for CHILD1 and two children in grades T, K, P, or 1-8 have been sampled in the same household, and for both children either PB1 = 1 or PB4 NE 1, check highest and lowest grade at CHILD1's school (SD6 and SD7) against grade of CHILD2 (reported in Screener). If prior conditions are met (it is possible that CHILD1 and CHILD2 attend the same school) and the respondent for both interviews is the same, ask SD9. If not, autocode SD9 = -1 and go to box before SE1. Else, go to box before SE1.

SD9. Does (CHILD1) go to the same school as (CHILD2)?

SSAME

YES 1

NO..... 2

Student Academic Performance and Behavior [PATH = S, H (HOMSCFLG = 1)]

*If PATH S (or PATH H and HOMSCFLG = 1) ask SE1.
Else, go to PTINTRO.*

SE1. Now I would like to ask you about (CHILD)'s grades during this school year. Overall, across all subjects (he/she) takes at school, does (he/she) get mostly...

SEGRADES	A's,	1	(GO TO SE3)
	B's,	2	(GO TO SE3)
	C's,	3	(GO TO SE3)
	D's,	4	(GO TO SE3)
	F's, or	5	(GO TO SE3)
	Does (CHILD)'s school not give these grades?	6	(GO TO SE2)

SE2. Would you describe (his/her) work at school as...

SEGRADEQ	Excellent,	1
	Above average,	2
	Average,	3
	Below average, or	4
	Failing?	5

SE3. Have any of (CHILD)'s teachers or (his/her) school contacted you (or (CHILD)'s (mother/stepmother/foster mother/father/stepfather/foster father/grandmother/grandfather/aunt/uncle/cousin) (or (the) other adult(s) in your household)) about any behavior problems (he/she) is having in school this year?

SEBEHAVR	YES	1
	NO	2

SE4. Have any of (his/her) teachers or (his/her) school contacted you (or (CHILD)'s (mother/stepmother/foster mother/father/stepfather/foster father/grandmother/ grandfather/aunt/uncle/ cousin) (or (the) other adult(s) in your household)) about any problems (he/she) is having with school work this year?

SESCHLWR	YES	1
	NO	2

SE5. During this school year, has (CHILD) ...

	YES	NO
SESUSOUT a. Had an out-of-school suspension?	1	2
SESUSPIN b. Had an in-school suspension, not counting detentions?	1	2
SEEXPEL c. Ever been expelled?	1	2

SE6. (Since starting kindergarten), has (CHILD) repeated (any grades/kindergarten)?

SEREPEAT YES 1 (GO TO BOX BEFORE SE7)
 NO 2 (GO TO SFINTRO)

<p><i>If PB6 or PB7 = T, K or P, autocode SEREPTK = 1 and go to SFINTRO. Else, ask SE7.</i></p>
--

SE7. What grade or grades did (he/she) repeat? [CODE ALL THAT APPLY.]
 [DISPLAY RESPONSE OPTIONS ONLY UP TO CURRENT GRADE OR GRADE EQUIVALENT]

SEREPTK	KINDERGARTEN	K
SEREPT1	FIRST GRADE	1
SEREPT2	SECOND GRADE	2
SEREPT3	THIRD GRADE	3
SEREPT4	FOURTH GRADE	4
SEREPT5	FIFTH GRADE	5
SEREPT6	SIXTH GRADE	6
SEREPT7	SEVENTH GRADE	7
SEREPT8	EIGHTH GRADE	8

After-School Arrangements [PATH = S]

Relative Care

SFINTRO.

[FIRST SCHOOL-AGE INTERVIEW OR CALLBACK]

[The Department of Education is interested in learning about the kinds of arrangements parents might have for their children after school. I would like to ask you about different types of arrangements you may have for (CHILD) after school on a regular basis, whether or not there is a charge or fee, but not including occasional babysitting.]

[SECOND SCHOOL-AGE INTERVIEW]

[Now let's talk about any care (CHILD) receives from relatives after school.]

SF1. Is (CHILD) now receiving care from a relative other than a parent on a regular basis after school, for example, from grandparents, brothers or sisters, or any other relatives?

RCNOW YES 1 (GO TO SF2)
NO 2 (GO TO SGINTRO)

SF2. How many different regular care arrangements do you have with relatives for (CHILD) after school?

* ONE 1
TWO 2
THREE 3
FOUR OR MORE 4

Ask SF3 through SF23 for each relative care arrangement.

SF3. (Let's talk about the relative who provides the most care after school./Now let's talk about the next relative who provides care for (CHILD) after school.) Is the relative who cares for (CHILD) after school (his/her)/Is that (CHILD)'s...

**RCTYPE1-
RCTYPE5** Grandmother, 1 (GO TO SF4)
Grandfather, 2 (GO TO SF4)
Aunt, 3 (GO TO SF4)
Uncle, 4 (GO TO SF4)
Brother, 5 (GO TO SF4)
Sister, or 6 (GO TO SF4)
Another relative? 7 (GO TO SF4)
NOW SAYS NO OTHER RELATIVE ARRANGEMENT
[DISPLAY ONLY FOR 2ND OR HIGHER ARRANGEMENT] 8 (GO TO SGINTRO)

SF4. Is the care that (CHILD) receives from (his/her) (RELATIVE) regularly scheduled at least once each week?

RCWEEK1- YES 1 (GO TO SF6)
RCWEEK5 NO 2 (GO TO SF5)

SF5. Does (CHILD)'s (RELATIVE) care for (him/her) on some other regularly scheduled basis, at least once each month?

RCMONTH1- YES 1 (GO TO SF10)
RCMONTH5 NO 2 (GO TO BOX AFTER SF23)

SF6. How many days each week does (CHILD) receive care from (his/her) (RELATIVE) after school?

RCDAYS1- DAYS ☐
RCDAYS5

SF7. How many hours each week does (CHILD) receive care from (his/her) (RELATIVE) after school?

RCHRSAF1- HOURS ☐☐
RCHRSAF5

If SF6 = 1, then go to SF9. Else, ask SF8.

SF8. On the days that (CHILD) receives care, that would be about (HOURS) per day, on average. Is that right?

* YES 1 (GO TO SF9)
NO 2 (CORRECTION SCREEN)

SF9. How many of those hours, if any, occur after 6:00 pm. each week? [DISPLAY TOTAL HOURS]

RCAFT61- HOURS ☐☐ (GO TO SF13)
RCAFT66

SF10. For how many weeks each month does (CHILD) receive care from (his/her) (RELATIVE)?

RCWKMO1- WEEKS ☐
RCWKMO5

SF11. During (that week/those weeks), how many days each week does (CHILD) receive care from (his/her) (RELATIVE)?

RCDAYWK1- DAYS ☐
RCDAYWK5

SF12. And during (that week/those weeks), how many hours each week does (CHILD) receive care from (his/her) (RELATIVE)?

RCHRWK1-RCCHRWK5 HOURS.....□□

SF13. Is there any charge or fee for the care (CHILD) receives from (his/her) (RELATIVE) after school, paid either by you or another person or agency?

RCFEE1-RCFEE5 YES 1 (GO TO SF14)
NO 2 (GO TO SF17)

SF14. Do any of the following people or organizations help to pay for (CHILD) to be cared for by (his/her) (RELATIVE)? How about...

		YES	NO
RCREL1-RCREL5	a. A relative of (CHILD) outside your household who provides money <u>specifically</u> for that care, not including general child support?	1	2
RCTANF1-RCTANF5	b. Temporary Assistance for Needy Families, or TANF?	1	2
RCSSAC1-RCSSAC5	c. Another social service, welfare, or child care agency?	1	2
RCEMPL1-RCEMPL5	d. An employer, not including a tax-free spending account for child care?	1	2
RCOTHER1-RCOTHER5	e. Someone else?	1	2

SF15. How much does your household pay for (CHILD)'s (RELATIVE) to care for (him/her), not counting any money that you may receive from others to help pay for care?
[IF NOTHING, ENTER ZERO.]

RCCOST1-RCCOST5 AMOUNT: \$□□□□.□□

RCUNIT1-RCUNIT5 UNIT:
PER HOUR..... 1
PER DAY 2
PER WEEK..... 3
PER MONTH..... 4
PER YEAR..... 5
EVERY TWO WEEKS..... 6
OTHER 91
RCCSTOS1/R-RCCSTOS5/R SPECIFY _____

If SF15 = zero or number of children in the household age 15 or younger = 1, go to SF17. Else, ask SF16.

SF16. Is this amount for (CHILD) only or does it include other children in your household?

RCCSTHH1- CHILD ONLY 1 (GO TO SF17)
RCCSTHH5 CHILD AND OTHER(S) 2 (GO TO SF16OV)

SF16OV. How many children is this amount for, including (CHILD)?

RCCSTHN1- NUMBER OF CHILDREN ☐
RCCSTHN5

SF17. Has (CHILD) been in this arrangement since the beginning of the school year?

RCARACH1- YES 1 (GO TO SF18)
RCARACH5 NO 2 (GO TO SF17OV)

SF17OV. What month did (CHILD) start at this child care arrangement?

RCARRMO1- September 1
RCARRMO5 October 2
 November 3
 December 4
 January 5
 February 6
 March 7
 April 8

SF18. Is this care provided in your home or another home?

RCPLACE1- OWN HOME 1 (GO TO SF19)
RCPLACE5 OTHER HOME 2 (GO TO SF19OV)
 BOTH/VARIES 3 (GO TO SF19OV)

SF19. Does (CHILD)'s (RELATIVE) who provides this care live in your household?

RCINHH1- YES 1
RCINHH5 NO 2

SF19OV. How old is (CHILD)'s (RELATIVE)?

RCAGE1- YEARS ☐☐
RCAGE5

SF20. What language does (CHILD)'s (RELATIVE) speak most when caring for (him/her)?

RCSPEAK1- RCSPKOS1/R- RCSPKOS5

ENGLISH	1
SPANISH	2
ENGLISH AND SPANISH EQUALLY	3
ENGLISH AND ANOTHER LANGUAGE EQUALLY	4
SPECIFY	
ANOTHER LANGUAGE	91
SPECIFY	

SF21. How many children are usually cared for together, in the same group at the same time, by (CHILD)'s (RELATIVE), counting (CHILD)? [IF IT VARIES, PROBE: How many children are there the majority of the time (CHILD) is there?]

RCKIDS1- RCKIDS5

NUMBER OF CHILDREN □ □

SF22. Counting (CHILD)'s (RELATIVE), how many adults usually care for (him/her) at the same time during those out-of-school hours? [IF IT VARIES, PROBE: How many adults are there the majority of the time (CHILD) is there?].

RCADLTS1- RCADLTS5

NUMBER OF ADULTS □

SF23. Now I'd like to ask about (CHILD)'s activities during the time (he/she) spends with (his/her) (RELATIVE). During those after-school hours, what does (CHILD) spend most of (his/her) time doing? You may name up to three things. [CODE UP TO THREE ACTIVITIES.]

RCAEDUC1- RCAEDUC5	HOMEWORK/EDUCATIONAL/READING/WRITING	1
RCACOMP1- RCACOMP5	COMPUTERS	2
RCAART1- RCAART5	ARTS (PERFORM OR STUDY MUSIC, CRAFTS, DRAMA, ETC.)	3
RCACHOR1- RCACHOR5	CHORES/WORK	4
RCAOUTP1- RCAOUTP5	OUTDOOR PLAY/ACTIVITIES/SPORTS	5
RCAINPL1- RCAINPL5	INDOOR PLAY	6
RCATV1- RCATV5	TELEVISION/VIDEOS/VIDEO GAMES/LISTENING TO MUSIC	7
RCAOTHE1- RCAOTHE5	OTHER	91

If SF2 >= 2 (more than one relative care arrangement), return to SF3 until the number of arrangements in SF2 are completed. Else, go to SF24.

SF24. Does (CHILD) have another care arrangement with a relative on a regular basis?

*

YES	1	(GO TO SF3)
NO	2	(GO TO SGINTRO)

Nonrelative Care

SGINTRO. [FIRST SCHOOL-AGE INTERVIEW OR CALLBACK]

[Now let's talk about any care (CHILD) receives from someone not related to (him/her), either in your home or someone else's. This includes home child care providers or neighbors, but not day care centers or after- school programs.]

[SECOND SCHOOL-AGE INTERVIEW]

[Now let's talk about any care (CHILD) receives from people that are not related to (him/her), not including day care centers or after- school programs.]

SG1. Is (CHILD) now receiving care in your home or another home on a regular basis after school from someone who is not related to (him/her)?

NCNOW YES 1 (GO TO SG2)
NO 2 (GO TO SH1)

SG2. How many different regular care arrangements do you have with nonrelatives for (CHILD) after school?

* ONE 1
TWO 2
THREE 3
FOUR OR MORE 4

Ask SG3 through SG23 for each nonrelative care arrangement.

SG3. (Let's start with the nonrelative who provides the most care./Now let's talk about the next care arrangement with a nonrelative). Is the care that (CHILD) receives from that person regularly scheduled at least once each week?

**NCWEEK1-
NCWEEK4** YES 1 (GO TO SG5)
NO 2 (GO TO SG4)
NOW SAYS NO OTHER NONRELATIVE ARRANGEMENT.
[DISPLAY FOR 2ND OR HIGHER ARRANGEMENT] 3 (GO TO SH1)

SG4. Does (CHILD) receive care from that person on some other regularly scheduled basis, at least once each month?

**NCMONTH1-
NCMONTH4** YES 1 (GO TO SG9)
NO 2 (GO TO BOX AFTER SG23)

SG5. How many days each week does (CHILD) receive care from that person after school?

**NCDAYS1-
NCDAYS4** DAYS ☐

SG6. How many hours each week does (CHILD) receive care from that person after school?

**NCHRSAF1-
NCHRSAF4**

HOURS.....□□

If SG5 = 1, go to SG8. Else, ask SG7.

SG7. On the days that (CHILD) receives care, that would be about (HOURS) per day, on average.
Is that right?

* YES 1 (GO TO SG8)
NO 2 (CORRECTION SCREEN)

SG8. How many of those hours, if any, occur after 6:00 p.m. each week? [DISPLAY TOTAL HOURS]

**NCAFT61-
NCAFT64**

HOURS.....□□ (GO TO SG12)

SG9. For how many weeks each month does (CHILD) receive care from that person?

**NCWKMO1-
NCWKMO4**

WEEKS.....□

SG10. During (that week/those weeks), how many days each week does (CHILD) receive care from that person?

**NCDAYWK1-
NCDAYWK4**

DAYS□

SG11. And during (that week/those weeks), how many hours each week does (CHILD) receive care from that person?

**NCHRWK1-
NCHRWK4**

HOURS.....□□

SG12. Is there any charge or fee for the care (CHILD) receives from this person after school, paid either by you or another person or agency?

**NCFEE1-
NCFEE4**

YES 1 (GO TO SG13)
NO 2 (GO TO SG16)

SG13. Do any of the following people or organizations help to pay for (CHILD) to be cared for by that person? How about...

		YES	NO
NCREL1- NCREL4	a. A relative of (CHILD) outside your household who provides money <u>specifically</u> for that care, not including general child support?	1	2
NCTANF1- NCTANF4	b. Temporary Assistance for Needy Families, or TANF?	1	2
NCSSAC1- NCSSAC4	c. Another social service, welfare, or child care agency?	1	2
NCEMPL1- NCEMPL4	d. An employer, not including a tax-free spending account for child care?	1	2
NCOTHER1- NCOTHER4	e. Someone else?	1	2

SG14. How much does your household pay this person to care for (CHILD), not counting any money that you may receive from others to help pay for care?
[IF NONE, ENTER ZERO.]

**NCCOST1-
NCCOST4** AMOUNT: \$

**NCUNIT1-
NCUNIT4** UNIT:
 PER HOUR..... 1
 PER DAY 2
 PER WEEK..... 3
 PER MONTH..... 4
 PER YEAR..... 5
 EVERY TWO WEEKS..... 6
 OTHER 91
 SPECIFY _____

**NCCSTOS1/R-
NCCSTOS4/R**

If SG14 = zero or number of children in the household age 15 or younger = 1, go to SG16. Else, ask SG15.

SG15. Is this amount for (CHILD) only or does it include other children in your household?

**NCCSTHH1-
NCCSTHH4** CHILD ONLY..... 1 (GO TO SG16)
 CHILD AND OTHER(S) 2 (GO TO SG15OV)

SG15OV. How many children is this amount for, including (CHILD)?

**NCCSTHN1-
NCCSTHN4** NUMBER OF CHILDREN

SG16. Has (CHILD) been in this arrangement since the beginning of the school year?

NCARACH1- YES 1 (GO TO SG17)
NCARACH4 NO 2 (GO TO SG16ov)

SG16OV. What month did (CHILD) start at this child care arrangement?

NCARRMO1- September 1
NCARRMO4 October 2
 November 3
 December 4
 January 5
 February 6
 March 7
 April 8

SG17. Is this care provided in your own home or in another home?

NCPLACE1- OWN HOME 1 (GO TO SG18)
NCPLACE4 OTHER HOME 2 (GO TO SG19)
 BOTH/VARIES 3 (GO TO SG19)

SG18 Does this person who cares for (CHILD) live in your household?

NCINHH1- YES 1
NCINHH4 NO 2

SG19. Is that person age 18 or older?

NCAGE1- YES 1 (GO TO SG20)
NCAGE4 NO 2 (GO TO SG19ov)

SG19OV. How old is that person?

NCAGEYY1- YEARS □□
NCAGEYY4

SG20. What language does (CHILD)'s main care provider speak most when caring for (him/her)?

NCSPEAK1- ENGLISH 1
NCSPEAK4 SPANISH 2
 ENGLISH AND SPANISH EQUALLY 3
 ENGLISH AND ANOTHER LANGUAGE EQUALLY 4
 SPECIFY
 ANOTHER LANGUAGE 91
 SPECIFY

NCSPKOS1/R-
NCSPKOS4/R

SG21. How many children are usually cared for together, in the same group at the same time, by that person, counting (CHILD)? [IF IT VARIES, PROBE: How many children are there the majority of the time (CHILD) is there?]

NCKIDS1- NUMBER OF CHILDREN ☐ ☐
NCKIDS4

SG22. Counting that person, how many adults usually care for (CHILD) at the same time during those out-of-school hours? [IF IT VARIES, PROBE: How many adults are there the majority of the time (CHILD) is there?]

NCADLTS1- NUMBER OF ADULTS..... ☐
NCADLTS4

SG23. Now I'd like to ask about (CHILD)'s activities during the time (he/she) spends with your care provider. During those after-school hours, what does (CHILD) spend most of (his/her) time doing? You may name up to three things. [CODE UP TO THREE ACTIVITIES.]

NCAEDUC1- NCAEDUC4	HOMEWORK/EDUCATIONAL/READING/WRITING	1
NCACOMP1- NCACOMP4	COMPUTERS	2
NCAART1- NCAART4	ARTS (PERFORM OR STUDY MUSIC, CRAFTS, DRAMA, ETC.) .	3
NCACHOR1- NCACHOR4	CHORES/WORK	4
NCAOUTP1- NCAOUTP4	OUTDOOR PLAY/ACTIVITIES/SPORTS.....	5
NCAINPL1- NCAINPL4	INDOOR PLAY	6
NCATV1- NCATV4	TELEVISION/VIDEOS/VIDEO GAMES/LISTENING TO MUSIC	7
NCAOTHE1- NCAOTHE4	OTHER	91

If SG2 >= 2 (more than one nonrelative care arrangement), return to SG3 until the number of arrangements in SG2 are completed. Else, go to SG24.

SG24. Does (CHILD) have another care arrangement with a nonrelative on a regular basis?

* YES 1 (GO TO SG3)
 NO..... 2 (GO TO SH1)

Center-Based Programs

[FIRST SCHOOL-AGE INTERVIEW OR CALLBACK]

SH1 [Some children participate in after-school programs that provide supervision and organized activities. These programs are usually held in a school or a center, and are different from individual activities like sports, scouts, or special lessons.]

Is (CHILD) now attending an after- school program at a school or in a center, either on a scheduled or a drop-in basis?

CPSNOW YES 1 (GO TO SH2)
NO 2 (GO TO SIINTRO)

SH2. How many different after school programs does (he/she) currently go to? Please count different programs, not different types of activities (he/she) may do at the same program.

* ONE 1
TWO 2
THREE 3
FOUR OR MORE 4

Ask SH3 through SH26 for each program.

SH3. (Let's talk about the program where (CHILD) spends the most time/Now let's talk about the next program in which (CHILD) participates.) Is (CHILD) signed up to attend the program on particular days and times?

CPSIGNU1- YES 1 (GO TO SH4)
CPSIGNU5 NO 2 (GO TO SH4)
NOW SAYS NO OTHER CENTER-BASED ARRANGEMENT
[DISPLAY ONLY FOR 2ND OR HIGHER ARRANGEMENT]..... 3 (GO TO SIINTRO)

SH4. Does (he/she) go to the program on a regularly scheduled basis at least once each week?

CPWEEK1- YES 1 (GO TO SH6)
CPWEEK5 NO 2 (GO TO SH5)

SH5. Does (CHILD) go to the program on some other regularly scheduled basis, at least once each month?

CPMONTH1- YES 1 (GO TO SH10)
CPMONTH5 NO 2 (GO TO BOX AFTER SH26)

SH6. How many days each week does (CHILD) go to the program?

CPDAYS1- DAYS ☐
CPDAYS5 REFUSED -7
DON'T KNOW -8

SH7. Other than regular school hours, how many hours each week does (CHILD) go to the program after school?

CPHRSAF1- HOURS ☐☐
CPHRSAF5 REFUSED -7
DON'T KNOW -8

If SH6 = 1, then go to SH9. Else, ask SH8.

SH8. On the days that (CHILD) goes to the program, that would be about (HOURS) per day, on average. Is that right?

* YES 1 (GO TO SH9)
NO 2 (CORRECTION SCREEN)

SH9. How many of those hours, if any, occur after 6:00 pm. each week? [DISPLAY HOURS]

CPAFT61- HOURS ☐☐ (GO TO SH13)
CPAFT65

SH10. For how many weeks each month does (CHILD) go to that program?

CPWKMO1- WEEKS ☐
CPWKMO5

SH11. During (that week/those weeks), how many days each week does (CHILD) go to that program?

CPDAYWK1- DAYS ☐
CPDAYWK5

SH12. And during (that week/those weeks), how many hours each week does (CHILD) go to that program?

CPHRWK1- HOURS ☐☐
CPHRWK5

SH13. Is there any charge or fee for the program, paid either by you or another person or agency?

CPFEE1- YES 1 (GO TO SH14)
CPFEE5 NO 2 (GO TO SH17)

SH14. Do any of the following people or organizations help to pay for (CHILD) to go to that program?
How about...

		YES	NO
CPREL1- CPREL5	a. A relative of (CHILD) outside your household who provides money <u>specifically</u> for that care, not including general child support?	1	2
CPTANF1- CPTANF5	b. Temporary Assistance for Needy Families, or TANF? .	1	2
CPSSAC1- CPSSAC5	c. Another social service, welfare, or child care agency?	1	2
CPEMPL1- CPEMPL5	d. An employer, not including a tax-free spending account for child care?	1	2
CPOTHER1- CPOTHER5	e. Someone else?	1	2

SH15. How much does your household pay for (CHILD) to go to the program, not counting any money that you may receive from others to help pay for care?
[IF NOTHING, ENTER ZERO.]

**CPCOST1-
CPCOST5** AMOUNT: \$

**CPUNIT1-
CPUNIT5** UNIT:

PER HOUR..... 1

PER DAY 2

PER WEEK..... 3

PER MONTH..... 4

PER YEAR..... 5

EVERY TWO WEEKS..... 6

OTHER 91

**CPCSTOS1/R-
CPCSTOS5/R** SPECIFY _____

If SH15 = zero or number of children in household age 15 or younger = 1, go to SH17. Else, ask SH16.

SH16. Is this amount for (CHILD) only or does it include other children in your household?

**CPCSTHH1-
CPCSTHH5** CHILD ONLY..... 1 (GO TO SH17)

CHILD AND OTHER(S) 2 (GO TO SH16OV)

SH16OV. How many children is this amount for, including (CHILD)?

**CPCSTHN1-
CPCSTHN5** NUMBER OF CHILDREN

SH17. Has (CHILD) been in this arrangement since the beginning of the school year?

**CPSCHYR1-
CPSCHYR5** YES 1 (GO TO SH18)

NO 2 (GO TO SH17OV)

SH17ov. What month did (CHILD) start at this child care arrangement?

**CPCARMT1-
CPCARMT5**

September	1
October	2
November	3
December	4
January	5
February.....	6
March	7
April.....	8

SH18. Where is this program located? For example, is it in a church or synagogue, a school, a community center, its own building, or some other place?

**CPPLACE1-
CPPLACE5**

OWN HOME.....	1	(GO TO SH21)
ANOTHER HOME	2	(GO TO SH21)
A CHURCH, SYNAGOGUE OR OTHER PLACE OF WORSHIP	3	(GO TO SH19)
A PUBLIC SCHOOL (K-12).....	4	(GO TO BOX BEFORE SH20)
A PRIVATE SCHOOL (K-12).....	5	(GO TO SH19)
A COLLEGE OR UNIVERSITY	6	(GO TO SH19)
A COMMUNITY CENTER.....	7	(GO TO SH19)
A PUBLIC LIBRARY	8	(GO TO SH21)
ITS OWN BUILDING	9	(GO TO SH19)
A PLACE OF EMPLOYMENT OR BUSINESS	10	(GO TO SH19)
YOUTH ORGANIZATION	11	(GO TO SH19)
OTHER	91	(GO TO SH19)

**CPPLCOS1/R-
CPPLCOS5/R**

SPECIFY _____

SH19. Is this program run by a church, synagogue, or other religious group?

**CPSPRLG1-
CPSPRLG5**

YES	1
NO.....	2

If SH18 NE 4 or 5 go to SH21. Else, if (SD1 = 1 (attends public school) and SH18 = 5 (receives care in private school)) or (SD1 = 2 (attends private school) and SH18 = 4 (receives care in public school)), autocode SH20 = 2 and go to SH21. Else go to SH20.

SH20. Is that the school where (CHILD) attends (kindergarten/(GRADE) grade)?

**CPPLACK1-
CPPLACK5**

YES	1	(GO TO SH23)
NO.....	2	(GO TO SH21)

SH21. Is transportation for (CHILD) to get to that program provided by...

**CPPTRN1-
CPPTRN5**

(CHILD'S) school or school district.....	1	(GO TO SH23)
The program, or	2	(GO TO SH23)
Neither	3	(GO TO SH22)

SH22. What kind of arrangement have you made to get (CHILD) to the after-school program? Is it...

CPOTRN1- CPOTRN5 A parent/guardian drives (him/her) 1
 A carpool, 2
 Relative or family friend (not carpool), 3
 Paid transportation 4
 Child walks, or 5
 Some other arrangement? 91
CPOTROS1/R CPOTROS5/R SPECIFY _____

SH23. What language does (CHILD)'s care provider or teacher at that program speak most when caring for (him/her)?

CPSPEAK1- CPSPEAK5 ENGLISH 1
 SPANISH 2
 ENGLISH AND SPANISH EQUALLY 3
 ENGLISH AND ANOTHER LANGUAGE EQUALLY 4
 SPECIFY _____
 ANOTHER LANGUAGE 91
CPSPKOS1/R- CPSPKOS5/R SPECIFY _____

SH24. How many children are usually in (CHILD)'s group, at the same time, at that program, counting (CHILD)? [IF IT VARIES, PROBE: How many children are there the majority of the time (CHILD) is there?]

CPKIDS1- CPKIDS5 NUMBER OF CHILDREN □□

SH25. How many adults usually are in (CHILD)'s group, at the same time, at that program? [IF IT VARIES, PROBE: How many adults are there the majority of the time (CHILD) is there?]

CPADLTS1- CPADLTS5 NUMBER OF ADULTS □□

SH26. Now I'd like to ask about (CHILD)'s activities during the time (he/she) spends at this program. During those after-school hours, what does (CHILD) spend most of (his/her) time doing? You may name up to three things. [CODE UP TO THREE ACTIVITIES.]

CPAEDUC1- CPAEDUC5 HOMEWORK/EDUCATIONAL/READING/WRITING 1
CPACOMP1- CPACOMP5 COMPUTERS 2
CPAART1- CPAART5 ARTS (PERFORM OR STUDY MUSIC, CRAFTS, DRAMA, ETC.) 3
CPACHOR1- CPACHOR5 CHORES/WORK 4
CPAOUTP1- CPAOUTP5 OUTDOOR PLAY/ACTIVITIES/SPORTS 5
CPAINPL1- CPAINPL5 INDOOR PLAY 6
CPATV1- CPATV5 TELEVISION/VIDEOS/VIDEO GAMES/LISTENING TO MUSIC 7
CPAOTHE1- CPAOTHE5 OTHER 91

If SH2 >= 2 (more than one center-based care arrangement), return to SH3 until the number of arrangements in SH2 are completed. Else, go to SH27.

SH27. Does (CHILD) attend any other after-school programs at a school or a center on a regular basis?

*

YES 1 (GO TO SH3)
NO 2 (GO TO SIINTRO)

After-School Activities [PATH = S]

SIINTRO.

[FIRST SCHOOL-AGE INTERVIEW OR CALLBACK]

[Now let's talk about any activities that (CHILD) might do on weekdays outside of school hours that are not part of an after-school program. These might include activities such as organized sports, music lessons, scouts, or religious education.]

[SECOND SCHOOL-AGE INTERVIEW]

[Now let's talk about any activities (CHILD) might do outside of school hours.]

SI1. (Not counting the program(s) we have already talked about,) Is (CHILD) participating in any activities on weekdays after school on a regular basis?

ASNOW YES 1 (GO TO SI2)
NO 2 (GO TO SJ1)

SI2. Since the beginning of the school year, has (CHILD) participated in any of the following kinds of after-school activities? How about... [IF YES: Were any of those activities provided by (CHILD)'s school?]

	YES	NO		YES	NO	
ASARTS	a. Arts, like music, dance, or painting? 1	2		1	2	ASSCARTS
ASSPORT	b. Sports? 1	2		1	2	ASSCSPOR
ASCLUB	c. Clubs, like yearbook, debate, or a book club? 1	2		1	2	ASSCCLUB
ASACAD	d. Other academic activities, like tutoring, or math lab? 1	2		1	2	ASSCACAD
ASVOLUN	e. Volunteer work or community service? 1	2		1	2	ASSCVOLU

If SI2f = 1 and SD1 = 2 (child is in a private school), ask SI2f_followup (on whether child's school provided the activity). Else, go to SI2g.

ASRELI	f. Religious activities or instruction? 1	2		1	2	ASSCRELI
ASSCOUT	g. Scouts? 1	2				

If SI2a-g = 2, autocode h = 1 and ask ASOTHEOS/R. Else, go to SI2h.

ASOTHER	h. Any other activities? 1	2		1	2	ASSCOTHR
ASOTHEOS/R	SPECIFY _____					

SI3. Does (CHILD) currently participate in activities or lessons after school on a regularly scheduled basis at least once each week?

ASWEEK YES 1 (GO TO SI8)
NO 2 (GO TO SI4)

SI4. Does (he/she) currently participate in activities or lessons after school on a regularly scheduled basis at least once each month?

ASMONTH YES 1 (GO TO SI5)
NO 2 (GO TO SJ1)

SI5. For how many weeks each month does (CHILD) participate in activities or lessons after school?

ASWKMO WEEKS ☐ (GO TO SI6)

SI6. During (that week/those weeks), how many days each week does (CHILD) do activities or lessons after school?

ASDAYWK DAYS ☐ (GO TO SI7)

SI7. And during (that week/those weeks), how many hours each week does (CHILD) do activities or lessons after school?

ASHRWK HOURS ☐☐ (GO TO SJ1)

SI8. Does (CHILD)'s participation in these activities help to cover the hours when you need adult supervision for (him/her)?

ASCOVER YES 1
NO 2

SI9. How many days each week does (CHILD) currently participate in activities or lessons after school?

ASDAYS DAYS ☐

SI10. How many hours each week does (CHILD) currently participate in activities or lessons after school?

ASHRS HOURS ☐☐

<i>If SI9 = 1, go to SI12. Else, ask SI11.</i>
--

SI11. On the days that (CHILD) participates in activities, that would be about (HOURS) per day, on average. Is that right?

* YES 1 (GO TO SI12)
NO 2 (CORRECTION SCREEN)

SI12. How many of those hours, if any, occur after 6:00 pm. each week? [DISPLAY TOTAL HOURS]

ASAFT6 HOURS □□

Self Care [PATH = S]

SJ1. Sometimes children are able to spend time responsible for themselves, either at home or somewhere else, without anyone around to supervise. Not counting times when an adult is at home and (CHILD) is outside playing, is (CHILD) responsible for (himself/herself) after school on a regular basis?

SCSELF YES 1 (GO TO BOX)
NO 2 (GO TO BOX BEFORE SL1)

*If any RELATION = 3 or 4 (brother or sister) and AGE < AGE2004 (younger sibling in the household), ask SJ10V.
Else, go to SJ2.*

SJ10V. Is (he/she) also responsible for (his/her) [(brother)(s) (and) (sister)(s)] during these hours?

SCRESIB YES 1
NO 2

SJ2. Is (he/she) responsible for (himself/herself) after school on a regular basis, at least once each week?

SCWEEK YES 1 (GO TO SJ4)
NO 2 (GO TO SJ3)

SJ3. Is (he/she) responsible for (himself/herself) after school on a regular basis, at least once each month?

SCMONTH YES 1 (GO TO SJ8)
NO 2 (GO TO BOX BEFORE SL1)

SJ4. How many days each week is (CHILD) responsible for (himself/herself) after school?

SCDAYS DAYS ☐

SJ5. How many hours each week is (CHILD) responsible for (himself/herself) after school?

SCHRSAF HOURS.....☐☐

If SJ4 = 1 then, go to SJ7. Else, ask SJ6.

SJ6. On the days that (CHILD) is responsible for (HERSELF/HIMSELF), that would be about (HOURS) per day, on average. Is that right?

* YES 1 (GO TO SJ7)
NO 2 (CORRECTION SCREEN)

SJ7. How many of those hours, if any, occur after 6:00 pm. each week? [DISPLAY HOURS]

SCAFT6 HOURS.....□□ (GO TO SJ11)

SJ8. During how many weeks each month is (CHILD) responsible for (himself/herself) after school?

SCWKMO WEEKS..... □

SJ9. During (that week/those weeks), how many days each week is (CHILD) responsible for (himself/herself) after school?

SCDAYWK DAYS □

SJ10. And during (that week/those weeks), how many hours each week is (CHILD) responsible for (himself/herself) after school?

SCHRWK HOURS.....□□

SJ11. During those after-school hours, what does (CHILD) spend most of (his/her) time doing? You may name up to three things. [CODE UP TO THREE ACTIVITIES.]

SCAEDUC	HOMEWORK/EDUCATIONAL/READING/WRITING	1
SCACOMP	COMPUTERS.....	2
SCAART	ARTS (PERFORM OR STUDY MUSIC, CRAFTS, DRAMA, ETC.) ..	3
SCACHOR	CHORES/WORK.....	4
SCAOUTPL	OUTDOOR PLAY/ACTIVITIES/SPORTS	5
SCAINPLA	INDOOR PLAY	6
SCATV	TELEVISION/VIDEOS/VIDEO GAMES/LISTENING TO MUSIC.....	7
SCAOTHER	OTHER	91

Alternative Arrangements [PATH = S]

If SF1, SG1, SH1, SI8, and SJ1 all = 2 (child has no current care arrangements), go to box before SK1. Else ask SL1.

SL1. What arrangement do you use the most on days when school is to be closed, such as school holidays or teacher in-service days?

PCMOST

MOTHER STAYS HOME.....	1
FATHER STAYS HOME.....	2
NONRESIDENT PARENT.....	3
BROTHER OR SISTER.....	4
RELATIVE CARE (OTHER THAN BROTHER OR SISTER)	5
NONRELATIVE CARE (NEIGHBOR, FRIEND, BABYSITTER).....	6
CHILD TAKES CARE OF HIMSELF/HERSELF	7
CENTER-BASED OR SCHOOL-BASED PROGRAM	8
MOTHER TAKES CHILD TO WORK	9
FATHER TAKES CHILD TO WORK	10
BOTH PARENTS TAKE CHILD TO WORK ABOUT EQUALLY	11
BOTH PARENTS STAY HOME ABOUT EQUALLY	12
OTHER	91

PCMOSTOS/R SPECIFY _____

Parental Care [PATH = S]

If SF1, SG1, SH1, SI8, and SJ1 all = 2 (child has no current care arrangements), then go to SK1. Else go to box before SM1INTRO.

SK1. Currently, are you (or) (his/her) (parents) (mother/stepmother/foster mother) (or) (father/stepfather/foster father) at home each day when (CHILD) gets home from school?

PAAHOME YES 1 (GO TO SK2)
 NO 2 (GO TO FIRST BOX BEFORE SM1INTRO)

SK2. During these after-school hours, what does (CHILD) spend most of (his/her) time doing? You may name up to three things. [CODE UP TO THREE ACTIVITIES.]

PAAEDUC HOMEWORK/EDUCATIONAL/READING/WRITING 1
PAACOMP COMPUTERS..... 2
PAAART ARTS (PERFORM OR STUDY MUSIC, CRAFTS, DRAMA, ETC.) .. 3
PAACHOR CHORES/WORK..... 4
PAAOUTPL OUTDOOR PLAY/ACTIVITIES/SPORTS 5
PAAINPLA INDOOR PLAY 6
PAATV TELEVISION/VIDEOS/VIDEO GAMES/LISTENING TO MUSIC..... 7
PAAOTHER OTHER 91

Selecting and Difficulty Finding After-School Care [PATH = S]

If SF1, SG1, or SH1 = 1 (child currently participates in at least one arrangement), go to box. Else, go to SM3.

*If there is only one arrangement, go to SM1.
Else, if there is more than one arrangement, select the arrangement with the greatest average weekly hours and go to SM1INTRO.*

Else, if two arrangements are the same average number of weekly hours, CATI will select one and go to SM1INTRO.

SM1INTRO. You said that (CHILD) receives care from ((HIS/HER) RELATIVE/a nonrelative/a program in (LOCATION)/an activity to provide adult supervision), for (NUMBER) hours per week, (NUMBER) days per week, and (NUMBER) weeks per month. Please respond to the next question thinking about that arrangement.

ARRGMOST

SM1. Parents select child care arrangements for a number of reasons. For each of the reasons I read, please tell me how important it was when you chose this arrangement for (CHILD). Please tell me whether it was not at all important, a little important, somewhat important, or very important to you.

NOT AT ALL IMPORTANT	A LITTLE IMPORTANT	SOMEWHAT IMPORTANT	VERY IMPORTANT
1	2	3	4

Rating

DLOCA The location of the arrangement? ☐

DCOST The cost of the arrangement? ☐

DRELY The reliability of the arrangement? ☐

DLERN The learning activities at the arrangement? ☐

DCHIL (CHILD) spending time with other kids (his/her) age? ☐

DHROP The times during the day that this caregiver is able to provide care? ☐

DNBGRP The number of other children in (CHILD)'s care group? ☐

SM2. How much difficulty did you have finding the type of after-school care you wanted for (CHILD)?
Would you say...

PPDIFCLT A lot, 1
 Some, 2
 A little, 3
 No difficulty, or 4
 Have you not found the after-school care you wanted? 5

<i>Ask SM3 only once per household.</i>

SM3. Do you feel there are good choices for after-school care where you live?

PPACHOIC YES 1
 NO 2
 HAVE NOT TRIED TO FIND CARE 3

Child Disability, Race, and Country of Origin (PATH=ALL)

PTINTRO. Now I have a few questions about (CHILD)'s health.

PT1. Has a doctor or other health professional ever told you that (CHILD) was developmentally delayed?

HDDELAY YES 1
NO 2

If PATH = 1, go to PT3. Else, ask PT2.

PT2. Has a health professional told you that (CHILD) has any of the following disabilities?
[RANDOM START; KEEP h, i, j, and k LAST.]

		YES	NO
HDLEARN	a. A specific learning disability?	1	2
HDRETARD	b. Mental retardation?	1	2
HDSPEECH	c. A speech or language delay?	1	2
HDDISTRB	d. A serious emotional disturbance?	1	2
HDDEAFIM	e. Deafness or another hearing impairment?	1	2
HDBLNDIM	f. Blindness or another visual impairment?	1	2
HDORTHO	g. An orthopedic impairment?	1	2
HDAUTISM	h. Autism?	1	2
HDADD	i. Attention deficit disorder, ADD, or ADHD?	1	2
HD PDD	j. Pervasive developmental disorder or PDD?	1	2
HDOTHER	k. Another health impairment lasting 6 months or more?	1	2

If any PT2a-k= 1, go to PT4. Else, go to PTBINTRO.

PT3. Has a health professional told you that (CHILD) has any of the following disabilities?
[RANDOM START; KEEP e LAST.]

		YES	NO
HDDEAFIM	a. Deafness or another hearing impairment?	1	2
HDBLNDIM	b. Blindness or another visual impairment?	1	2
HDORTHO	c. An orthopedic impairment?	1	2
HDDEVEL	d. Severe developmental delay?	1	2
HDOTHER	e. Another health impairment lasting 6 months or more?	1	2

If any PT3a-e=1, go to PT4. Else, go to PTBINTRO.

PT4. Is (CHILD) receiving services for (his/her) (disability/disabilities) ...

		YES	NO
HDSCHL	a. From your local school district?	1	2
HGOVT	b. From a state or local health or social service agency?	1	2
HDOCTOR	c. From a doctor, clinic, or other health care provider?	1	2
HDSOURCE	d. From some other source?	1	2
HDSOUROS/R	What is that? _____		

<p><i>If PATH = N, S, H, or (PATH I and AGE2004=2) ask PT5. Else, go to PTBINTRO.</i></p>

PT5. (Does/Do) (CHILD)'s (disability/disabilities) affect (his/her) ability to learn?

HDAFFECT	YES.....	1
	NO.....	2

PTBINTRO. Now I have some questions about (CHILD)'s background.

PTB1. In what state, country, or territory was (CHILD) born?

CBORNUS	ONE OF THE 50 STATES OR THE DISTRICT OF COLUMBIA.....	1	(GO TO PTB2)
	ONE OF THE U.S. TERRITORIES [PUERTO RICO, GUAM, AMERICAN SAMOA, U.S. VIRGIN ISLANDS, MARIANA ISLANDS, MIDWAY ISLANDS, OR SOLOMON ISLANDS]	2	(GO TO PTB1OV)
CTERROS/R	SPECIFY _____		
CCONTOS/R	SOME OTHER COUNTRY?.....	3	(GO TO PTB1OV)
	SPECIFY _____		

PTB1OV. How old was (CHILD) when (he/she) first moved to the (United States/50 states or the District of Columbia)? [ROUND MONTHS OR FRACTIONS TO NEAREST YEAR.]

CMOVEAGE	AGE.....	<input type="text"/> <input type="text"/>
-----------------	----------	---

PTB2. Is (he/she) of Spanish, Hispanic, or Latino origin?

CHISPAN	YES	1
	NO.....	2

PTB3. What is (CHILD)'s race? You may name more than one. Is (he/she)...
 [IF "HISPANIC" PROBE "Is that White Hispanic, Black Hispanic, both, or something else?"]
 [CODE ALL THAT APPLY].

CWHITE	White,.....	1
CBLACK	Black or African American,	2
CAMIND	American Indian or Alaska Native,.....	3
CASIAN	Asian, or	4
CPACI	Native Hawaiian or other Pacific Islander?	5
CRACEOTH	OTHER RACE?	91
CRACEOS/R	SPECIFY _____	

<i>If AGE2004 >= 2, ask PTB4. Else, go to PARINTRO</i>

PTB4. What language does (CHILD) speak most at home?

	ENGLISH	1
CSPEAK	SPANISH	2
	ENGLISH AND SPANISH EQUALLY	3
	ENGLISH AND ANOTHER LANGUAGE EQUALLY	4
CSPEAKOS/R	SPECIFY _____	
	CHILD DOESN'T SPEAK	5
	ANOTHER LANGUAGE	91
CSPEAKOS/R	SPECIFY _____	

Parent/Guardian Characteristics [PATH = ALL]

Mother Items

PARINTRO. These next questions are about parents or guardians who live with (CHILD).

Ask all parent/guardian characteristics (PUINTRO through PU20) once for their mother in the household. Except ask question PU19 for each sampled child when PATH = I, N, S or (PATH = H and HOMSCFLG = 1).

If there is no mother or father in the household but there are both a grandmother and a grandfather and one of the grandparents is the respondent, ask section PU about the grandmother (and section PV about the grandfather). Else, go to the next box.

If there are two mothers or two fathers, use the lowest value between MOMTYPE1 and MOMTYPE2 or DADTYPE1 and DADTYPE2 to select the subject of section PU or PV. If both same sex parents have the same value, choose MOMTYPE1 or DADTYPE1 as the subject of section PU or PV. Else, go to next box.

**If HHMOM = 1, 2, or 3 (mother or female guardian), go to PUINTRO. Else, if HHMOM = 4 (no mother/female guardian), go to first box before PVINTRO.*

PUINTRO. Let's start with (you/(CHILD)'s mother/grandmother/(NAME)).

PU1. [Are you/Is (CHILD'S) (mother/stepmother/foster mother/grandmother/(NAME))] currently...

MOMSTAT	Married,	1	(GO TO PU2)
	Separated,	2	(GO TO BOX)
	Divorced,	3	(GO TO BOX)
	Widowed, or	4	(GO TO BOX)
	Never married?	5	(GO TO BOX)

*If HHMOM is 1, then there is a birth or adoptive mother in the household. If HHMOM is 2, then there is a stepmother or foster mother, other parent/guardian, or female partner/girlfriend of parent in the household. If HHMOM is 3, then there is no mom or dad; there is a female respondent in the household.

If the only HH member other than the mother/grandmother who is age 16 or older is the subject child, autocode PU1OV = 2. Else, if any HH member has PA4 = 12, 13, 14 (same sex parent or female or male partner of parent/guardian) autocode PU1OV = 1. Else, if any HH member other than the mother/grandmother and other than the subject child is age 16 or older ask PU1OV. Else, go to PU2.

PU1OV. (Are you/Is she) currently living with a partner?

MOMLIVW YES 1
NO 2

PU2. How old (were you/was (CHILD)'s (mother/stepmother/foster mother/grandmother/(NAME)) when (you/she) first became a mother, stepmother, or guardian to any child?

MOMNEW YEARS OF AGE.....

PU3. What was the first language (you/(CHILD)'s (mother/stepmother/foster mother/grandmother/(NAME)) learned to speak?

MOMLANG ENGLISH 1 (AUTOCODE PU4=1 AND GO TO PU5)
SPANISH 2 (GO TO PU4)
ENGLISH AND SPANISH EQUALLY 3 (GO TO PU4)
ENGLISH AND ANOTHER LANGUAGE EQUALLY 4 (GO TO PU4)
SPECIFY _____
ANOTHER LANGUAGE 91 (GO TO PU4)
MOMLANOS/R SPECIFY _____

PU4. What language (do you/does she) speak most at home now?

MOMSPEAK ENGLISH 1
SPANISH 2
ENGLISH AND SPANISH EQUALLY 3
ENGLISH AND ANOTHER LANGUAGE EQUALLY 4
SPECIFY _____
(ENGLISH AND OTHER LANGUAGE SPECIFIED IN PU3 EQUALLY) 5
(OTHER LANGUAGE SPECIFIED IN PU3) 6
ANOTHER LANGUAGE 91
MOMSPEOS/R SPECIFY _____

PU5. In what state, country, or territory [were you/was (CHILD)'s (mother/stepmother/foster mother/grandmother)/(NAME)] born?

MOMBORN ONE OF THE 50 STATES OR THE DISTRICT OF COLUMBIA..... 1 (GO TO PU6)
 ONE OF THE U.S. TERRITORIES [PUERTO RICO, GUAM,
 AMERICAN SAMOA, U.S. VIRGIN ISLANDS, MARIANA
 ISLANDS, MIDWAY ISLANDS, OR SOLOMON ISLANDS] 2 (GO TO PU5OV)
MOMTEROS/R SPECIFY _____
 SOME OTHER COUNTRY..... 3 (GO TO PU5OV)
MOMCONOS/R SPECIFY _____

PU5OV. How old (were you/was she) when (you/she) first moved to the (United States/50 states or the District of Columbia)?

MOMUSAGE AGE

PU6. What is the highest grade or year of school that (you/(CHILD)'s (mother/stepmother/foster mother/grandmother)/(NAME)) completed?

MOMGRADE UP TO 8TH GRADE..... 1 (ENTER GRADE, GO TO PU7)
 9TH TO 11TH GRADE..... 2 (ENTER GRADE, GO TO PU7)
MOMGRAD1 12TH GRADE BUT NO DIPLOMA..... 3 (GO TO PU7)
MOMGRAD2 HIGH SCHOOL DIPLOMA/EQUIVALENT..... 4 (GO TO PU8)
 VOC/TECH PROGRAM AFTER HIGH SCHOOL
 BUT NO VOC/TECH DIPLOMA..... 5 (GO TO PU7)
 VOC/TECH DIPLOMA AFTER HIGH SCHOOL..... 6 (GO TO PU7)
 SOME COLLEGE BUT NO DEGREE 7 (GO TO PU6OV)
 ASSOCIATE'S DEGREE (AA, AS) 8 (GO TO PU7)
 BACHELOR'S DEGREE (BA, BS)..... 9 (GO TO PU8)
 GRADUATE OR PROFESSIONAL SCHOOL BUT NO DEGREE.... 10 (GO TO PU8)
 MASTER'S DEGREE (MA, MS)..... 11 (GO TO PU8)
 DOCTORATE DEGREE (PHD, EDD)..... 12 (GO TO PU8)
 PROFESSIONAL DEGREE BEYOND BACHELOR'S DEGREE
 (MEDICINE/MD; DENTISTRY/DDS; LAW/JD/LLB; ETC.)..... 13 (GO TO PU8)

PU6OV. Did (you/she) earn a vocational or technical diploma after leaving high school?

MOMVOTEC YES 1
 NO..... 2

PU7. (Do you/Does she) have a high school diploma or its equivalent, such as a GED?

MOMDIPL YES 1
 NO..... 2

PU8. During the past week, did (you/(CHILD)'s (mother/stepmother/foster mother/grandmother/(NAME)) work at a job for pay or income, including self-employment?

MOMWORK YES 1 (GO TO PU10)
 NO 2 (GO TO PU9)
 RETIRED 3 (GO TO PU13)
 DISABLED/UNABLE TO WORK..... 4 (GO TO PU13)

PU9. (Were you/Was she) on leave or vacation from a job during the past week?

MOMLEAVE YES 1 (GO TO PU10)
 NO 2 (GO TO PU13)

PU10. About how many total hours per week (do you/does she) usually work for pay or income, counting all jobs?
 [IF HOURS VARY, PROBE FOR AVERAGE PER WEEK.]

MOMHOURS WEEKLY HOURS

PU11. (Do you/Does she) work a regular day shift, that is, one with most of the hours between 6 am and 6 pm?

MOMRSFT YES 1 (GO TO PU13)
 NO 2 (GO TO PU12)

PU12. (Do you/Does she) work...

MOMVSFT A regular shift at times other than between 6 am
 and 6 pm, 1
 A variable shift—one that changes from days
 to evenings or nights, where (you/she) choose(s)
 your/her) own hours, 2
 A variable shift, with hours set by (your/her)
 employer? 3
 WORKS WHEN WORK IS AVAILABLE 4

PU13. In the past 12 months, how many months, [if any], (have you/has she) worked for pay or income?

MOMMTHS MONTHS

*If PU8 or PU9 = 1 (working or on leave/vacation), go to
 PU17. If PU8 =3 (retired), then autocode PU16 = 3
 (retired), and go to box after PU16. If PU8 = 4
 (disabled/unable to work), then autocode PU16 = 5
 (unable to work), and go to box after PU16. Else, ask
 PU14.*

PU14. (Have you/Has she) been actively looking for work in the past 4 weeks?

MOMLOOK YES 1 (GO TO PU15)
NO 2 (GO TO PU16)

PU15. What (have you/has she) been doing in the past 4 weeks to find work? (Have you/Has she)...

	YES	NO
MOMAGN a. Checked with an employment agency?	1	2
MOMEMPL b. Checked with employer directly or sent resume?	1	2
MOMREL c. Checked with friends or relatives?	1	2
MOMANSAD d. Placed or answered job ads?	1	2

If PU15 a-d NE 1 (not actively looking for work), go to PU16. Else, go to box after PU16.

PU16. What (were you/was she) doing most of last week? Would you say...

MOMACTY Keeping house or caring for children or
other dependents, 1
Going to school, 2
Retired, 3
Volunteering 4
Unable to work, or 5
Something else? 91

MOMACTOS/R What was that? _____

If PU16 = 2, autocode PU17 = 1 and go to PU18. Else, ask PU17.

PU17. (Are you/is (CHILD)'s (mother/stepmother/foster mother/grandmother/(NAME)) attending or enrolled in a school, college, university, or adult learning center, or receiving vocational education or job training [other than at (your/her) regular job]?

MOMENROL YES 1 (GO TO PU18)
NO 2 (GO TO BOX BEFORE PU19)

PU18. How many hours each week (do you/does she) attend school or training? [REFERS TO ACTUAL TIME, NOT CREDIT HOURS.]

MOMENHRS WEEKLY HOURS

*If (PU8 = 1 or PU9 = 1), and(PATH = I, N S, or (PATH = H and HOMSCFLG = 1)) (working or on leave/vacation and child is not homeschooled only)ask PU19.
Else, go to first box before PVINTRO.*

PU19. Have (CHILD)'s (child/after-school) care needs influenced [your/(his/her) (mother/stepmother/foster mother/grandmother/(NAME'S)) choice of a job or work schedule in any way?

MOMCHOIC

YES 1
NO 2

Ask PU20 only once per mother per household.

PU20. How easy is it for (you/her) to leave work if (CHILD/one of your children/one of her children) gets sick or needs (you/her) unexpectedly? Would you say...

MOMLVEAS

[VERY] Easy, 1
Somewhat easy, 2
Not very easy, or 3
Difficult? 4

Father Items

Ask all parent/guardian characteristics (PVINTRO through PV20) once per father in the household. Except ask question PV19 for each sampled child when PATH = I, N, S or (PATH = H and HOMSCFLG = 1).

If there is no mother or father in the household but there are both a grandmother and a grandfather and one of the grandparents is the respondent, ask section PV about the grandfather. Else, go the next box.

If there are two fathers, use the lowest value between DADTYPE1 and DADTYPE2 to select the subject of section PV. If both same sex parents have the same value, choose DADTYPE1 as the subject of section PV. Else, go to next box.

**If HHDAD = 1, 2, or 3 (father or male guardian), go to PVINTRO.
Else, if HHDAD = 4 (no father or male guardian), go to PWINTRO.*

PVINTRO. Let's talk about [you/ (CHILD'S) (father/stepfather/foster father/grandfather/(NAME))].

PV1. [Are you/Is (CHILD'S) (father/stepfather/foster father/grandfather/(NAME))] currently...

DADSTAT	Married,	1	(GO TO PV3)
	Separated,	2	(GO TO BOX)
	Divorced,	3	(GO TO BOX)
	Widowed, or	4	(GO TO BOX)
	Never married?	5	(GO TO BOX)

If the only HH member other than the father/grandfather who is age 16 or older is the subject child, autocode PV2 = 2. Else, if any HH member has PA4 = 12, 13, 14 (same sex parent or female or male partner of parent/guardian) autocode PV2 = 1. Else, if any HH member other than the father/grandfather and other than the subject child is age 16 or older ask PV2. Else, go to PV3.

*If HHDAD is 1, then there is a birth or adoptive father in the household. If HHDAD is 2, then there is a stepfather or foster father, other parent/guardian, or male partner/boyfriend of parent in the household. If HHDAD is 3, then there is no mom or dad; there is a male respondent in the household.

PV2. (Are you/Is he) currently living with a partner?

DADLIVW YES 1
NO 2

PV3. What was the first language (you/(CHILD)'s (father/stepfather/foster father/grandfather/(NAME)) learned to speak?

DADLANG ENGLISH 1 (AUTOCODE PV4=1 AND GO TO PV5)
SPANISH 2 (GO TO PV4)
ENGLISH AND SPANISH EQUALLY 3 (GO TO PV4)
ENGLISH AND ANOTHER LANGUAGE EQUALLY 4 (GO TO PV4)
SPECIFY _____
ANOTHER LANGUAGE 91 (GO TO PV4)
DADLANOS/R SPECIFY _____

PV4. What language (do you/does he) speak most at home now?

DADSPEAK ENGLISH 1
SPANISH 2
ENGLISH AND SPANISH EQUALLY 3
ENGLISH AND ANOTHER LANGUAGE EQUALLY 4
SPECIFY _____
(ENGLISH AND OTHER LANGUAGE SPECIFIED IN PV3 EQUALLY) 5
(OTHER LANGUAGE SPECIFIED IN PV3) 6
ANOTHER LANGUAGE 91
DADSPEOS/R SPECIFY _____

PV5. In what state, country, or territory (were you/was (CHILD)'s father/stepfather/foster father/grandfather/ was (NAME)) born?

DADBORN ONE OF THE 50 STATES OR THE DISTRICT OF COLUMBIA 1 (GO TO PV6)
ONE OF THE U.S. TERRITORIES [PUERTO RICO, GUAM, AMERICAN SAMOA, U.S. VIRGIN ISLANDS, MARIANA ISLANDS, MIDWAY ISLANDS, OR SOLOMON ISLANDS] 2 (GO TO PV5OV)
DADTEROS/R SPECIFY _____
SOME OTHER COUNTRY 3 (GO TO PV5OV)
DADCONOS/R SPECIFY _____

PV5OV. How old (were you/was he) when (you/he) first moved to the (United States/50 states or the District of Columbia)?

DADUSAGE AGE

PV6. What is the highest grade or year of school that (you/(CHILD)'s (father/stepfather/foster father/grandfather/(NAME)) completed?

DADGRADE	UP TO 8TH GRADE.....	1	(ENTER GRADE, GO TO PV7)
	9TH TO 11TH GRADE.....	2	(ENTER GRADE, GO TO PV7)
DADGRAD1	12TH GRADE BUT NO DIPLOMA.....	3	(GO TO PV7)
DADGRAD2	HIGH SCHOOL DIPLOMA/EQUIVALENT.....	4	(GO TO PV8)
	VOC/TECH PROGRAM AFTER HIGH SCHOOL BUT NO VOC/TECH DIPLOMA	5	(GO TO PV7)
	VOC/TECH DIPLOMA AFTER HIGH SCHOOL.....	6	(GO TO PV7)
	SOME COLLEGE BUT NO DEGREE	7	(GO TO PV6OV)
	ASSOCIATE'S DEGREE (AA, AS)	8	(GO TO PV7)
	BACHELOR'S DEGREE (BA, BS).....	9	(GO TO PV8)
	GRADUATE OR PROFESSIONAL SCHOOL BUT NO DEGREE....	10	(GO TO PV8)
	MASTER'S DEGREE (MA, MS).....	11	(GO TO PV8)
	DOCTORATE DEGREE (PHD, EDD).....	12	(GO TO PV8)
	PROFESSIONAL DEGREE BEYOND BACHELOR'S DEGREE (MEDICINE/MD; DENTISTRY/DDS; LAW/JD/LLB; ETC.).....	13	(GO TO PV8)

PV6OV. Did (you/he) earn a vocational or technical diploma after leaving high school?

DADVOTEC	YES	1
	NO.....	2

PV7. (Do you/Does he) have a high school diploma or its equivalent, such as a GED?

DADDIPL	YES	1
	NO.....	2

PV8. During the past week, did (you/(CHILD)'s (father/stepfather/foster father/grandfather/(NAME)) work at a job for pay or income, including self-employment?

DADWORK	YES	1	(GO TO PV10)
	NO.....	2	(GO TO PV9)
	RETIRED	3	(GO TO PV13)
	DISABLED/UNABLE TO WORK.....	4	(GO TO PV13)

PV9. (Were you/Was he) on leave or vacation from a job during the past week?

DADLEAVE	YES	1	(GO TO PV10)
	NO.....	2	(GO TO PV13)

PV10. About how many total hours per week (do you/does he) usually work for pay or income, counting all jobs?
[IF HOURS VARY, PROBE FOR AVERAGE PER WEEK.]

DADHOURS	WEEKLY HOURS.....	<input type="checkbox"/> <input type="checkbox"/>
-----------------	-------------------	---

PV11. (Do you/Does he) work a regular day shift, that is, one with most of the hours between 6 am and 6 pm?

DADRSFT YES 1 (GO TO PV13)
NO 2 (GO TO PV12)

PV12. (Do you/Does he) work...

DADVSFT A regular shift at times other than between 6 am
and 6 pm, 1
A variable shift—one that changes from days
to evenings or nights, where (you/he) choose(s)
your/his) own hours, 2
A variable shift, with hours set by (your/his)
employer? 3
WORKS WHEN WORK IS AVAILABLE 4

PV13 In the past 12 months, how many months, [if any], (have you/has he) worked for pay or income?

DADMTHS MONTHS

If PV8 or PV9 = 1 (working or on leave/vacation), go to PV17. If PV8 = 3 (retired), then autocode PV16 = 3 (retired), and go to the box before PV17. If PV8 = 4 (disabled/unable to work), then autocode PV16 = 5 (unable to work), and go to the box before PV17. Else, ask PV14.

PV14. (Have you/Has he) been actively looking for work in the past 4 weeks?

DADLOOK YES 1 (GO TO PV15)
NO 2 (GO TO PV16)

PV15. What (have you/has he) been doing in the past 4 weeks to find work? (Have you/Has he)...

	YES	NO
DADAGN a. Checked with an employment agency.....	1	2
DADEMPL b. Checked with employer directly or sent resume.....	1	2
DADREL c. Checked with friends or relatives.....	1	2
DADANSAD d. Placed or answered job ads.....	1	2

If PV15 a-d NE 1 (not actively looking for work), go to PV16. Else, go to box after PV16.

PV16. What (were you/was he) doing most of last week? Would you say...

DADACTY Keeping house or caring for children or
other dependents, 1
Going to school, 2
Retired, 3
Volunteering 4
Unable to work, or 5
Something else? 91
DADACTOS/R What was that? _____

*If PV16 = 2, then autocode PV17 = 1, and go to PV18.
Else, ask PV17.*

PV17. (Are you/is (CHILD)'s (father/stepfather/foster father/grandfather/(NAME)) attending or enrolled in a school, college, university, or adult learning center, or receiving vocational education or job training [other than at (your/his) regular job]?)

DADENROL YES 1 (GO TO PV18)
NO 2 (GO TO BOX BEFORE PV19)

PV18. How many hours each week (do you/does he) attend school or training? [REFERS TO ACTUAL TIME, NOT CREDIT HOURS]

DADENHRS WEEKLY HOURS

*If (PV8 = 1 or PV9 = 1), and(PATH = I, N S, or (PATH = H and
HOMSCFLG = 1)) (working or on leave/vacation and child is not
homeschooled only), ask PV19.
Else, go to box before PWINTRO.*

PV19. Have (CHILD)'s (child/after-school) care needs influenced [your/(his/her) (father/stepfather/foster father/grandfather/(NAME))'s] choice of a job or work schedule in any way?

DADCHOIC YES 1
NO 2

Ask PV20 once per father per household.

PV20. How easy is it for (you/him) to leave work if (CHILD/one of your children/one of his children) gets sick or needs (you/him) unexpectedly? Would you say...

DADLVEAS [VERY] Easy, 1
Somewhat easy, 2
Not very easy, or 3
Difficult? 4

Household Characteristics

The following questions are asked only once per household.

PWINTRO. Now, a few questions about your household.

If PU8=1 or PU9=1 (mother works, on leave/vacation) and PV8=1 or PV9=1 (father works, on leave/vacation) and SF1, SG1, SH1, & SJ1 = 2, and SI8 NE 1 (no child care arrangements or after-school activities), then ask PW1. Else ask PW2.

PW1. (Do you and (CHILD'S)(OTHER PARENT/GUARDIAN)/Do (CHILD'S) parent's) arrange your work schedules so that a parent is available to care for [(CHILD)/the children]?

HWKSKED YES 1
NO 2

PW2. (Do you/Does anyone in your household) work for a child care center?

CNTRWORK YES 1
NO 2

PW3. (Do you/Do any adults or teenagers in your household) care for or baby-sit someone else's child or children on a regular basis, either in your home or someone else's home?

Please do not include occasional babysitting.

CHCRWORK YES 1
NO 2

PW4. Do you...

HOWNHOME Own your home, 1
Rent your home, or 2
Have some other arrangement? 3

PW5. Besides (PHONE NUMBER), do you have other telephone numbers in your household, not including cellular phones?

* YES 1 (GO TO PW7)
NO 2 (GO TO PW8)
NOT MY NUMBER..... 3 (GO TO PW6)

PW6. [INTERVIEWER: ASK FOR AND RECORD THE TELEPHONE NUMBER REACHED. RECORD REASON FOR REACHING DIFFERENT TELEPHONE NUMBER.]

* TELEPHONE NUMBER REACHED _____

AREA CODE CHANGE1
OTHER NUMBER IN HOUSEHOLD2
ORIGINAL NUMBER IS THAT OF ANOTHER HOUSEHOLD AND
NUMBER IS BEING FORWARDED TO THIS HOUSEHOLD3
NEVER HEARD OF ORIGINAL NUMBER4
OTHER [RECORD EXPLANATION IN COMMENTS]5

If PW6 = 3, go to CLOSE2. Else, for cases where PW5 = 3 (not number dialed), ask PW5 again with new number.

PW7. How many of these additional telephone numbers are for home use, not including cellular phones?

HNUMUSE NUMBER..... ☐ ☐ (GO TO BOX)

*If PW7 > 0 (other telephone numbers for home use), go to PW9.
Else, go to PW8.*

PW8. Besides this phone number, do you have any telephone numbers in your household that are used for computer or fax lines?

* YES1 (GO TO PW9)
NO2 (GO TO PW12)

PW9. How many of these additional telephone numbers are used for computer or fax lines?

* NUMBER..... ☐ ☐ (GO TO PW10)

If PW9 = 0, go to PW12. Else, ask PW10.

PW10. Some households have telephone numbers that are used both for talking and for computer or fax lines. (Is the number/Are any of the numbers) used for (a) computer or fax line(s) ever answered for talking?

* YES1 (GO TO BOX)
NO2 (GO TO PW12)

*If PW9 = 1 (only 1 other telephone number for computer or fax),
autocode PW11= 1, and go to PW12. Else, ask PW11.*

PW11. How many computer or fax telephone numbers are also answered for talking?

* NUMBER..... ☐☐

PW12. So that we can group households geographically, may I have your ZIP code?

STFZIP/R ZIP CODE ☐☐☐☐☐

PW13. Are there any conditions in your neighborhood that make you worried about the health or safety of ((CHILD)/any of the children in your household)?

HNEIGHB YES 1
NO 2

*If number of children in household age 15 or younger = 1 and
if all of RCFEE, NCFEE, and CPFEE NE 1, then autocode
PW14 = 2 and go to PW15. Else ask PW14.*

PW14. Is a state government or welfare agency currently helping you pay for any child care costs (for any child)?

HGOVCUR YES 1
NO 2

PW15. In the past 3 years, that is, since (DATE), has your family received benefits from Temporary Assistance for Needy Families, or TANF?

HTANF3YR YES 1
NO 2

PW16. In the past 3 years, that is, since (DATE), has your family received benefits from (STATE WELFARE PROGRAM)?

HWELF3YR YES 1
NO 2

*If PW15 =2 (no TANF in past 3 years) autocode PW17a=2. If
PW16=2 (no state welfare in past 3 years), autocode PW17b
=2 and go to PW17c. Else, ask PW17a-f.*

PW17. In the past 12 months, that is since (CURRENT MONTH) of 2004, has your family received benefits from any of the following programs? How about...

	YES	NO
HWELFTAN	a. Temporary Assistance for Needy Families, or TANF? 1	2
HWELFADC	b. Your (STATE WELFARE PROGRAM) 1	2
HWIC	c. Women, Infants, and Children, or WIC? 1	2
HFOODST	d. Food Stamps?..... 1	2
HMEDIC	e. Medicaid or (STATE MEDICAID PROGRAM)? 1	2
HCHIP	f. Child Health Insurance Program or (STATE CHIP PROGRAM)? 1	2

PW18. In studies like this, households are sometimes grouped according to income. What was the total income of all persons in your household over the past year, including salaries or other earnings, interest, retirement, and so on for all household members?

Was it...

HINCMRNG	\$25,000 or less, or 1	(READ SET 1)
	More than \$25,000? 2	(GO TO PW19)

PW19. Was it...

HINCM50K	\$50,000 or less, or 1	(READ SET 2)
	More than \$50,000? 2	(READ SET 3)

Was it...

[SET 1]

HINCOME	\$5,000 or less 1
	\$5,001 to \$10,000 2
	\$10,001 to \$15,000 3
	\$15,001 to \$20,000, or 4
	\$20,001 to \$25,000? 5

[SET 2]

	\$25,001 to \$30,000 6
	\$30,001 to \$35,000 7
	\$35,001 to \$40,000 8
	\$40,001 to \$45,000, or 9
	\$45,001 to \$50,000 10

[SET 3]

	\$50,001 to \$60,000, 11
	\$60,001 to \$75,000, 12
	\$75,001 to \$100,000, or 13
	Over \$100,000? 14

CLOSE1. Thank you, but we are only asking about children in a specific age or grade range. Please hold on for a moment while I check to see if there is anyone else I need to ask you about or anyone else I need to speak with. [IF NOT, THANK RESPONDENT]

CLOSE2. Those are all the questions I have about (CHILD). Please hold on for a moment while I check to see if there is anyone else I need to ask about or anyone else I need to speak with. [IF NOT, THANK RESPONDENT]

NHES:2005 ADULT EDUCATION INTERVIEW

Section	Page
AA. Initial Background	A-125
AB. English as a Second Language Classes	A-128
AC. Basic Skills and GED Preparation Classes	A-133
AD. Credential Programs: College or University Degree Programs.....	A-138
AE. Credential Programs: Vocational or Technical Diploma Programs	A-143
AF. Apprenticeship Programs	A-147
AG. Participation in Formal Courses	A-149
AH. Work-Related Courses	A-152
AI. Personal Interest/Development Courses.....	A-157
AJ. Distance Learning.....	A-160
AK. Informal Learning Activities for Personal Interest.....	A-161
AL. Remaining Background Questions	A-162
AM. Household Characteristics.....	A-168

This page is intentionally blank.

NHES:2005 ADULT EDUCATION INTERVIEW

INTRO1. [READ IF RESPONDENT WAS NOT SCREENER RESPONDENT: Hello, this is (INTERVIEWER). I'm calling for the U.S. Department of Education. We are conducting a voluntary and confidential national study about the educational activities of adults.]

INTRO2. The purpose of this interview is to learn what kinds of educational activities adults may take part in. We will talk about degree programs and classes in colleges and vocational schools, courses or training sessions related to work or personal interest, and other ways of learning new information or skills. On average, the interview takes 15 minutes.

Initial Background

AA1. First, I have a few questions about your background and work experience. What is the highest grade or year of school that you completed?

IBGRADE	UP TO 8TH GRADE.....	1	(ENTER GRADE, GO TO AA2)
IBGRAD1	9TH TO 11TH GRADE.....	2	(ENTER GRADE, GO TO AA2)
IBGRAD2	12TH GRADE BUT NO DIPLOMA.....	3	(GO TO AA2)
	HIGH SCHOOL DIPLOMA/EQUIVALENT.....	4	(GO TO AA2OV)
	VOC/TECH PROGRAM AFTER HIGH SCHOOL BUT NO VOC/ TECH DIPLOMA	5	(GO TO AA2)
	VOC/TECH DIPLOMA AFTER HIGH SCHOOL.....	6	(GO TO AA2)
	SOME COLLEGE BUT NO DEGREE	7	(GO TO AA1OV)
	ASSOCIATE'S DEGREE (AA, AS)	8	(GO TO AA2)
	BACHELOR'S DEGREE (BA, BS).....	9	(GO TO AA4)
	GRADUATE OR PROFESSIONAL SCHOOL BUT NO DEGREE.....	10	(GO TO AA4)
	MASTER'S DEGREE (MA, MS).....	11	(GO TO AA4)
	DOCTORATE DEGREE (PHD, EDD).....	12	(GO TO AA4)
	PROFESSIONAL DEGREE BEYOND BACHELOR'S DEGREE (MEDICINE/MD; DENTISTRY/DDS; LAW/JD/LLB; ETC.)	13	(GO TO AA4)

AA1OV. Did you earn a vocational or technical diploma after leaving high school?

IBVOC DIP	YES	1
	NO	2

AA2. (Do you have/Did you later receive) a high school diploma or its equivalent, such as a GED?

IBDIPL YES 1 (GO TO AA2OV)
NO 2 (GO TO AA6)

AA2OV. Did you receive your high school diploma or its equivalent in the U.S?

IBUSDIPL YES 1
NO 2

AA3. Did you receive your high school diploma or its equivalent in the past 12 months?

IBDIPLYR YES 1
NO 2

AA4. Did you complete your high school requirements through a regular high school diploma or through a GED test, (or did you go to college without earning a high school diploma)?
[OPTION 3 DISPLAYED ONLY IF IBGRADE >= 9]

IBHSREQ REGULAR HIGH SCHOOL DIPLOMA 1 (GO TO AA6)
GED TEST 2 (GO TO AA5)
NO HIGH SCHOOL DIPLOMA/GED 3 (GO TO AA6)
OTHER 91 (GO TO AA6)
IBHSROS/R SPECIFY _____

AA5. Did you ever take classes or have a tutor to prepare for taking the GED test?

IBGEDCLS YES 1
NO 2

AA6. Did you work at a job for pay or income at any time in the past 12 months, including self-employment?

IBWORK12 YES 1 (GO TO AA7)
NO 2 (GO TO AA10)

AA7. Were you self-employed at any time in the past 12 months?

IBSELFEM YES 1 (GO TO AA8)
NO 2 (GO TO AA9)

AA8. Besides being self-employed, did you also work for another employer in the past 12 months?

IBOTHEMP YES 1
NO 2

If AA8 =2 (self-employed only), then autocode AA9 (number of employers) = 1.

AA9. (Counting your self-employment as one job,) how many different employers did you work for in the past 12 months?

IBEMPNUM NUMBER..... ☐☐

AA10. About your language background, what was the first language you learned to speak?

IBLANG ENGLISH 1 (AUTOCODE AA11=1 AND GO TO INTRO3)
SPANISH 2 (GO TO AA11)
ENGLISH AND SPANISH EQUALLY 3 (GO TO AA11)
ENGLISH AND ANOTHER LANGUAGE EQUALLY 4 (GO TO AA11)
SPECIFY _____
ANOTHER LANGUAGE 91 (GO TO AA11)
IBLANGOS/R SPECIFY _____

AA11. What language do you speak most at home now?

IBSPEAK ENGLISH 1
SPANISH 2
ENGLISH AND SPANISH EQUALLY 3
ENGLISH AND ANOTHER LANGUAGE EQUALLY 4
SPECIFY _____
(ENGLISH AND OTHER LANGUAGE SPECIFIED IN AA10 EQUALLY) 5
(LANGUAGE SPECIFIED IN AA10) 6
ANOTHER LANGUAGE 91
IBSPEAOS/R SPECIFY _____

INTRO3. Now, I'd like to ask you about different kinds of education and training programs, courses, workshops, and seminars you may have taken during the past 12 months. (Please don't include daytime high school programs.)

English as a Second Language Classes

If AA10 = 2 or 91 (first language is not English), go to AB1.
Else, go to box before AC1.

AB1. During the past 12 months, did you take any classes or have a tutor to learn English as a Second Language?

ESLANG YES 1 (GO TO AB2)
NO 2 (GO TO AB21)

AB2. Are you currently taking ESL classes or tutoring, have you completed the ESL instruction, or did you stop without completing it?

ESNOW CURRENTLY TAKING 1
COMPLETED 2
STOPPED WITHOUT COMPLETION 3

AB3. (Do/Did) you take the ESL classes mainly for work-related reasons or mainly for personal interest?

ESREAS WORK-RELATED 1
PERSONAL INTEREST 2
BOTH EQUALLY 3

AB4. (Are you taking/Did you take) the ESL classes...

		YES	NO
ESCHIL	a. To help your children with school work?	1	2
ESUSCIT	b. To get U.S. citizenship?	1	2
ESJOB	c. To get a new job with a different employer?	1	2
ESRAISE	d. To help you get a raise or promotion?	1	2
ESCOLVOC	e. To be able to attend college or vocational school?	1	2
ES PUBAST	f. To meet a requirement for public assistance?	1	2
ESFEEL	g. To improve the way you feel about yourself?	1	2
ESLIFE	h. To make it easier to do things on a day-to-day basis?	1	2

AB5. Who (do/did) you take your ESL classes from? That is, what type of school, organization, or business (teaches/taught) the ESL classes?
[IF "EMPLOYER", PROBE: What type of organization is that?]

ESPR TYP POSTSECONDARY SCHOOL (COLLEGE/UNIVERSITY,
COMMUNITY/JUNIOR COLLEGE, VOCATIONAL/TECHNICAL/
OCCUPATIONAL SCHOOL)..... 1
OTHER SCHOOL OR SCHOOL DISTRICT (ELEMENTARY, JUNIOR
HIGH, HIGH SCHOOL, OR ADULT LEARNING CENTER)..... 2
PRIVATE BUSINESS/COMPANY/HOSPITAL 3
GOVERNMENT AGENCY (FEDERAL, STATE, LOCAL) 4
PROFESSIONAL ASSOCIATION/ORGANIZATION/UNION..... 5
PUBLIC LIBRARY 6
COMMUNITY OR RELIGIOUS ORGANIZATION, NONPROFIT..... 7
OTHER..... 91

ESPR TOS/R SPECIFY _____

If AA6 = 1 and AA8 NE 2 (worked in the past 12 months and not self-employed only), go to AB6. Else, go to AB7.

AB6. (Is/Was) the (INSTRUCTIONAL PROVIDER) also your employer?

ESPROVEM YES 1
NO 2

AB7. (Are you taking /Did you take) the ESL classes for college credit?

ESCOLL YES 1
NO 2

AB8. (Are/Were) the ESL classes part of a family literacy program, such as Even Start or Head Start?

ESFMLIT YES 1
NO 2

AB9. In the past 12 months, how many total hours did you attend the ESL classes?

ESHRYR TOTAL HOURS..... □□□

If R has difficulty reporting the total hours, ask AB10 and AB11. Else, go to AB12.

AB10. Thinking about the length of the ESL classes you (are attending/attended), how many days, weeks, or months did you attend the classes in the past 12 months?
[DO NOT ROUND. USE DECIMAL IF NEEDED.]

* NUMBER..... □□□

* Unit
 DAYS 1
 WEEKS..... 2
 MONTHS..... 3
 SEMESTER 4
 QUARTER..... 5
 OTHER 91

* SPECIFY _____

AB11. For about how many hours did you attend the ESL classes (during each (day/week/month))?
[DO NOT ROUND. USE DECIMAL IF NEEDED.] [INFORMATION PROVIDED FOR AB10 AND AB11 WILL BE USED TO CALCULATE TOTAL HOURS PER YEAR FOR INCORPORATION INTO AB9 AND DELIVERY ON THE PUBLIC-USE DATA FILE.]

* HOURS..... □□□

AB12. In the past 12 months, about how much of your own or your family's money did you pay for...

ESTUITON a. Tuition and fees to attend the ESL classes, including
 money you borrowed and have to pay back?\$□,□□□

ESMATLS b. How much for books and other materials?\$□,□□□

*If AB12a > 0 (paid some amount for tuition and fees) and
 AB12b = 0 (paid nothing for books or materials), ask AB13.
 Else, go to box before AB14.*

AB13. Did the tuition and fees also include books and other materials?

ESINCBK YES 1
 NO..... 2

*If AA6 = 1 and AA8 NE 2 (worked in the past 12 months and
 not self-employed only), go to AB14. Else, go to AB22.*

AB14. (Have you been/Were you) employed during the time you (have been/were) taking the ESL classes?

ESWORK YES1 (GO TO AB15)
NO.....2 (GO TO AB22)

AB15. Did your employer require you to take the ESL classes?

ESEMPREQ YES1 (GO TO AB17)
NO.....2 (GO TO AB16)

AB16. Did your employer suggest or encourage you to take the ESL classes?

ESEMPUG YES1
NO.....2

AB17. (Are you taking/Did you take) the ESL classes at your workplace?

ESWRKPL YES1
NO.....2

AB18. (Are you taking/Did you take) the ESL classes during your regular work hours?

ESWRKHR YES1
NO.....2

AB19. (Are/Were) you being paid by your employer during the hours you (are/were) taking the ESL classes?

ESEMPAID YES1
NO.....2

AB20. Did your employer...

		YES	NO
ESEMPUI	a. Pay all or part of the tuition and fees for the ESL classes?	1	2
ESEMPMAT	b. Pay all or part of the costs of books and other materials?.....	1	2

Go to AB22.

AB21. As an adult, have you ever taken classes or had a tutor to learn English?

ESEVER YES1
NO.....2

AB22. How well do you read English? Would you say...

READENGL Very well,1
Well,2
Not well, or3
Not at all?4

AB23. How well do you write English? Would you say...

WRITENGL Very well,1
Well,2
Not well, or3
Not at all?4

Basic Skills and GED Preparation Classes

If [AA2 = 2 (no high school diploma)] or [AA3 = 1 (received high school diploma in the past 12 months) and AA4 NE 1 (other than through a regular high school diploma)] or [AA1 (IBGRADE)= 1-8 and AA2OV = 2 (foreign high school diploma and no college degree)], then go to AC1. Else, go to AD1.

AC1. During the past 12 months, did you take any classes or have a tutor...

		YES	NO
BSIMPROV	a. To improve your basic reading, writing, and math skills?	1	2
BSGED	b. To prepare to take the General Educational Development test, or GED?	1	2
BSHSEQUV	c. In some other high school equivalency program or adult high school program?	1	2

If any of AC1a-c = 1 (basic skills or GED preparation classes), go to AC2. Else, go to AC20.

AC2. Are you currently taking basic skills or high school completion classes, have you completed those classes, or did you stop without completing the classes?

BSNOW	CURRENTLY TAKING	1
	COMPLETED	2
	STOPPED WITHOUT COMPLETION	3

AC3. (Do/Did) you take the basic skills or high school completion classes mainly for work-related reasons or mainly for personal interest?

BSREAS	WORK-RELATED	1
	PERSONAL INTEREST	2
	BOTH EQUALLY	3

AC4. (Are you taking/Did you take) the basic skills or high school completion classes...

		YES	NO
BSCHIL	a. To help your children with school work?	1	2
BSJOB	b. To get a new job with a different employer?	1	2
BSRAISE	c. To help you get a raise or promotion?	1	2
BSCOLVOC	d. To be able to attend college or vocational school?	1	2
BSPUBAST	e. To meet a requirement for public assistance?	1	2
BSFEEL	f. To improve the way you feel about yourself	1	2
BSLIFE	g. To make it easier to do things on a day-to-day basis?	1	2

AC5. Who (do/did) you take your basic skills or high school completion classes from? That is, what type of school, organization, or business (teaches/taught) the classes?
[IF "EMPLOYER", PROBE: What type of organization is that?]

BSPARTYP	POSTSECONDARY SCHOOL (COLLEGE/UNIVERSITY, COMMUNITY/JUNIOR COLLEGE, VOCATIONAL/TECHNICAL/ OCCUPATIONAL SCHOOL).....	1
	OTHER SCHOOL OR SCHOOL DISTRICT (ELEMENTARY, JUNIOR HIGH, HIGH SCHOOL, OR ADULT LEARNING CENTER).....	2
	PRIVATE BUSINESS/COMPANY/HOSPITAL	3
	GOVERNMENT AGENCY (FEDERAL, STATE, LOCAL)	4
	PROFESSIONAL ASSOCIATION/ORGANIZATION/UNION.....	5
	PUBLIC LIBRARY	6
	COMMUNITY OR RELIGIOUS ORGANIZATION, NONPROFIT.....	7
	OTHER.....	91
BSPRTOS/R	SPECIFY _____	

<p><i>If AA6 = 1 <u>and</u> AA8 NE 2 (worked in the past 12 months and not self-employed only), go to AC6. Else, go to AC7.</i></p>

AC6. (Is/Was) the (INSTRUCTIONAL PROVIDER) also your employer?

BSPROVEM	YES	1
	NO	2

AC7. (Are/Were) the basic skills or high school completion classes part of a family literacy program, such as Even Start or Head Start?

BSFMLIT	YES	1
	NO	2

AC8. In the past 12 months, how many total hours did you attend the basic skills or high school completion classes?

BSHRYR TOTAL HOURS..... □□□

If R has difficulty reporting the total hours, go to AC9 and AC10. Else, go to AC11.

AC9. Thinking about the length of the basic skills or high school completion classes you (are attending/attended), how many days, weeks, or months did you attend the classes in the past 12 months?

[DO NOT ROUND. USE DECIMAL IF NEEDED.]

* NUMBER..... □□□

* Unit
 DAYS1
 WEEKS.....2
 MONTHS.....3
 SEMESTER4
 QUARTER5
 OTHER91
 * SPECIFY _____

AC10. For about how many hours did you attend the basic skills or high school completion classes (during each (day/week/month))?
 [DO NOT ROUND. USE DECIMAL IF NEEDED.] [INFORMATION PROVIDED FOR AC9 AND AC10 WILL BE USED TO CALCULATE TOTAL HOURS PER YEAR FOR INCORPORATION INTO AC8 AND DELIVERY ON THE PUBLIC-USE DATA FILE.]

* HOURS..... □□□

AC11. In the past 12 months, about how much of your own or your family's money did you pay for...

BSTUITON a. Tuition and fees to attend the basic skills or high school completion classes, including money you borrowed and have to pay back?.....\$□,□□□
BSMATLS b. How much for books and other materials?\$□,□□□

If AC11a > 0 (paid some amount for tuition and fees) and AC11b = 0 (paid nothing for books or materials), ask AC12. Else, go to box before AC13.

AC12. Did the tuition and fees also include books and other materials?

BSINCBK YES1
 NO.....2

If AA6 = 1 and AA8 NE 2 (worked in the past 12 months and not self-employed only), go to AC13. Else, go to AD1.

AC13. (Have you been/Were you) employed during the time you (have been/were) taking the basic skills or high school completion classes?

BSWORK YES1 (GO TO AC14)
NO.....2 (GO TO AD1)

AC14. Did your employer require you to take the basic skills or high school completion classes?

BSEMPREQ YES1 (GO TO AC16)
NO.....2 (GO TO AC15)

AC15. Did your employer suggest or encourage you to take the basic skills or high school completion classes?

BSEMPUG YES1
NO.....2

AC16. (Are you taking/Did you take) the basic skills or high school completion classes at your workplace?

BSWRKPL YES1
NO.....2

AC17. (Are you taking/Did you take) the basic skills or high school completion classes during your regular work hours?

BSWRKHR YES1
NO.....2

AC18. (Are/Were) you being paid by your employer during the hours you (are/were) taking the basic skills or high school completion classes?

BSEMPAID YES1
NO.....2

AC19. Did your employer...

		YES	NO
BSEMPUI	a. Pay all or part of the tuition and fees for the basic skills or high school completion classes?	1	2
BSEMPMAT	b. Pay all or part of the cost for books and other materials?	1	2

Go to AD1.

AC20. As an adult, have you ever taken classes or had a tutor to learn basic skills or to prepare to take a GED test?

BSEVER	YES	1
	NO	2

Credential Programs: College or University Degree Programs

AD1. (Not including the classes you told us about earlier,) During the past 12 months, were you enrolled in a program to earn a college or university degree, such as an associate's, bachelor's, or graduate degree?

CRDEGREE YES 1 (GO TO AD2)
 NO 2 (GO TO FIRST BOX AFTER AD2)

AD2. In what types of college degree programs were you enrolled?
 [CODE UP TO 5. CATEGORIES CAN BE ENTERED MORE THAN ONCE FOR MULTIPLE PROGRAMS OF THE SAME PROGRAM TYPE.]

CRTYASC ASSOCIATE'S DEGREE (AA, AS) 1
CRTYBCH BACHELOR'S DEGREE (BA, BS) 2
CRTYMAS MASTER'S DEGREE (MA, MS) 3
CRTYDOC DOCTORATE (PHD, EDD) 4
CRTYPRF PROFESSIONAL DEGREE BEYOND BACHELOR'S DEGREE
 (MEDICINE/MD; DENTISTRY/DDS; LAW/JD/LLB; ETC.) 5
CRTYOTH ANOTHER DEGREE 91
CRTYOS1/R- SPECIFY _____
CRTYOS4/R

If AA1 (IBGRADE) >= 9 (bachelor's degree or more) go to next box. Else, go to box before AD5.

If AA1 (IBGRADE) = 9 or 10 (bachelor's degree or some graduate school), display post-baccalaureate certificate. If AA1 = 11 (master's degree), display post-baccalaureate certificate or post-master's certificate. If AA1 = 12 or 13 (doctorate or professional degree), display post-baccalaureate, post-master's certificate, or post-doctoral certificate.

AD3. During the past 12 months, were you enrolled in a program to earn a post-baccalaureate certificate, (post-master's certificate,) (or post-doctoral certificate)?

CRPOSTDG YES 1 (GO TO AD4)
 NO 2 (GO TO BOX AFTER AD4)

AD4. Which certificate was that?
[CODE ALL THAT APPLY]

CRPOSBAC	POST-BACCALAUREATE CERTIFICATE	1
CRPOSMA	POST-MASTER'S CERTIFICATE	2
CRPOSDOC	POST-DOCTORAL CERTIFICATE	3

If AD1 = 1 (college degree program) and/or AD3 = 1 (certificate program), ask AD5 for each program coded in AD2 and/or AD4. Else, go to AE1.

AD5. What was the major subject or field of study of your (DEGREE/CERTIFICATE) program?

CRMAJOR1/R- CRMAJOR4/R	MAJOR FIELD OF STUDY
---	----------------------------

For Each Program Mentioned

AD6. Did you take the (DEGREE/CERTIFICATE) program (in (MAJOR)) mainly for work-related reasons or mainly for personal interest?

CRREAS1-	WORK-RELATED.....	1
CRREAS4	PERSONAL INTEREST	2
	BOTH EQUALLY	3

AD7. Did you take your (DEGREE/CERTIFICATE) program (in (MAJOR)) to get or to keep a state, industry, or company certificate or license?

CRCERT1-	YES	1
CRCERT4	NO	2

AD8. In what month and year did you start your (DEGREE/CERTIFICATE) program (in (MAJOR))?

CRSTRM1-	MONTH.....	<input type="checkbox"/> <input type="checkbox"/>
CRSTRM4		
CRSTRTY1-	YEAR	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
CRSTRTY4		

AD9. In what month and year did you complete or do you expect to complete your (DEGREE/CERTIFICATE) program (in (MAJOR))? [IF DON'T KNOW, PROBE WHETHER NEVER COMPLETED OR DO NOT INTEND TO COMPLETE.]

**CRCOMPM1-
CRCOMPM4
CRCOMPY1-
CRCOMPY4**

MONTH..... ☐☐

YEAR ☐☐☐☐

NEVER COMPLETED 13

DO NOT INTEND TO COMPLETE..... 14

*If CRCOMPM1- CRCOMPM4 = 13 or 14, autocode
CRCOMPY1- CRCOMPY4 = 13 or 14, respectively.*

*If the program being collected is for a master's degree or
higher, including post-master's or post-doctoral certificates
(AD2 = 3, 4, 5 and/or AD4 = 2, 3), autocode AD10 to 2 and
go to AD11. Else, go to AD10.*

AD10. Did you take the (DEGREE/CERTIFICATE) program (in (MAJOR)) at a 2-year community or junior college or at a 4-year college or university?

**CRINST1-
CRINST4**

2-YEAR COMMUNITY OR JUNIOR COLLEGE 1

4-YEAR COLLEGE OR UNIVERSITY 2

OTHER 91

**CRINSTO1/R-
CRINSTO4/R**

SPECIFY _____

AD11. During the past 12 months, have you been enrolled in the (DEGREE/CERTIFICATE) program (in (MAJOR)) as a full-time student, part-time student, or both?

**CRPTFT1-
CRPTFT4**

FULL-TIME STUDENT 1

PART-TIME STUDENT 2

BOTH 3

AD12. In the past 12 months, how many semesters or quarters were you enrolled in your (DEGREE/ CERTIFICATE) program (in (MAJOR))?

**CRENRNU1-
CRENRNU4
CRENRUN1-
CRENRUN4**

NUMBER..... ☐

Unit

SEMESTER 1

QUARTER 2

OTHER 91

**CRENRUO1/R-
CRENRUO4/R-**

SPECIFY _____

AD13. How many total credit hours were you enrolled in your (DEGREE/CERTIFICATE) program (in (MAJOR)) in the past 12 months?

**CRCRDHR1-
CRCRDHR4**

TOTAL CREDIT HOURS ☐☐ (GO TO AD15)

CREDIT HOURS DO NOT APPLY TO THE DEGREE/CERTIFICATE
PROGRAM..... 99 (GO TO AD14)

AD14. How many total classroom hours did you take in the past 12 months?

CRCLSHR1- TOTAL CLASSROOM HOURS
CRCLSHR4

AD15. In the past 12 months, about how much of your own or your family's money did you pay for...

CRTUITO1- a. Tuition and fees to attend the (DEGREE/CERTIFICATE)
CRTUITO4 program, including money you borrowed and have to
pay back? \$
CRMATLS1- b. How much for books and other materials? \$
CRMATLS4

*If AD15a > 0 (paid some amount for tuition and fees) and
AD15b = 0 (paid nothing for books or materials), ask AD16.
Else, go to box before AD17.*

AD16. Did the tuition and fees also include books and other materials?

CRINCBK1- YES 1
CRINCBK4 NO 2

*If AA6 = 1 and AA8 NE 2 (worked in the past 12 months and
not self-employed only), go to AD17. Else, go to AE1.*

AD17. (Have you been/Were you) employed during the time you (have been/were) taking the
(DEGREE/CERTIFICATE) program (in (MAJOR))?

CRWORK1- YES 1 (GO TO AD18)
CRWORK4 NO 2 (GO TO AE1)

AD18. Did your employer require you to take the (DEGREE/CERTIFICATE) program (in (MAJOR))?

CREMPRE1- YES 1 (GO TO AD20)
CREMPRE4 NO 2 (GO TO AD19)

AD19. Did your employer suggest or encourage you to take the (DEGREE/CERTIFICATE) program (in
(MAJOR))?

CREMPSU1- YES 1
CREMPSU4 NO 2

AD20. (Are you taking/Did you take) the (DEGREE/CERTIFICATE) program (in (MAJOR)) at your
workplace?

CRWRKPL1- YES 1
CRWRKPL4 NO 2

AD21. (Are you taking/Did you take) the (DEGREE/CERTIFICATE) program (in (MAJOR)) during your
regular work hours?

CRWRKHR1- YES 1
CRWRKHR4 NO 2

AD22. (Are/Were) you being paid by your employer during the hours you (are/were) taking the (DEGREE/CERTIFICATE) program (in (MAJOR))?

CREMPAI1- YES1
CREMPAI4 NO2

AD23. Did your employer...

		YES	NO
CREMPTU1-	a. Pay all or part of the tuition and fees for the		
CREMPTU4	(DEGREE/CERTIFICATE) program (in (MAJOR))?	1	2
CREMPMA1-	b. Pay all or part of the costs of books and other materials?.....	1	2
CREMPMA4			

Credential Programs: Vocational or Technical Diploma Programs

AE1. During the past 12 months, were you enrolled in a program to earn a vocational or technical diploma after high school?

CRVOCDIP YES1 (GO TO AE2)
NO.....2 (GO TO AF1)

AE2. In what types of vocational or technical diploma programs were you enrolled?
[CODE UP TO 5. CATEGORIES CAN BE ENTERED MORE THAN ONCE FOR MULTIPLE PROGRAMS OF THE SAME PROGRAM TYPE.]

VOVOC VOCATIONAL DIPLOMA.....1
VOTECH TECHNICAL DIPLOMA.....2
VOASSOC ASSOCIATE'S DEGREE (AA, AS)3
VOOTHDIP ANOTHER DIPLOMA OR CERTIFICATE91
VOTYOS1/R- SPECIFY _____
VOTYOS3/R

Ask AE3 for each program coded in AE2.

AE3. What was the major subject or field of study of your (VOC/TECH) program?

VOMAJOR1/R- MAJOR FIELD OF STUDY _____
VOMAJOR3/R

For Each Program Reported

AE4. Did you take the (VOC/TECH) program (in (MAJOR)) mainly for work-related reasons or mainly for personal interest?

VOREAS1- WORK-RELATED.....1
VOREAS3 PERSONAL INTEREST2
BOTH EQUALLY3

AE5. Did you take your (VOC/TECH) program (in (MAJOR)) to get or to keep a state, industry, or company certificate or license?

VOCERT1- YES1
VOCERT3 NO.....2

AE6 In what month and year did you start your (VOC/TECH) program (in (MAJOR))?

VOSTRM1- MONTH..... ☐☐
VOSTRM3
VOSTRY1- YEAR ☐☐☐☐
VOSTRY3

AE7. In what month and year did you complete or do you expect to complete your (VOC/TECH) program (in (MAJOR))? [IF DON'T KNOW, PROBE WHETHER NEVER COMPLETED OR DON'T INTEND TO COMPLETE.]

VOCMPM1- MONTH..... ☐☐
VOCMPM3
VOCMPY1- YEAR ☐☐☐☐
VOCMPY3- NEVER COMPLETED 13
DO NOT INTEND TO COMPLETE..... 14

*If VOCMPM1 – VOCMPM3 = 13 or 14, autocode
VOCMPY1 – VOCMPY3 = 13 or 14, respectively.*

AE8. During the past 12 months, have you been enrolled in the (VOC/TECH) program (in (MAJOR)) as a full-time student, part-time student, or both?

VOPTFT1- FULL-TIME STUDENT 1
VOPTFT3 PART-TIME STUDENT 2
BOTH 3

AE9. In the past 12 months, how many months, semesters, or quarters were you enrolled in your (VOC/TECH) program (in (MAJOR))?

VOENRNU1- NUMBER..... ☐☐
VOENRNU3
VOENRUN1- Unit
VOENRUN3 MONTH..... 1
SEMESTER 2
QUARTER 3
OTHER 91
VOENRUO1/R- SPECIFY _____
VOENRUO3/R

AE10. How many courses did you take in your (VOC/TECH) program (in (MAJOR)) in the past 12 months?

VOCRSNU1- NUMBER..... ☐☐
VOCRSNU3

AE11. How many total credit hours were you enrolled in your (VOC/TECH) program (in (MAJOR)) in the last 12 months?

VOCRDHR1- TOTAL CREDIT HOURS ☐☐ (GO TO AE13)
VOCRDHR3 CREDIT HOURS DO NOT APPLY TO THE VOC/TECH
PROGRAM 99 (GO TO AE12)

AE12. How many total classroom hours did you take in the past 12 months?

VOCLSHR1- TOTAL CLASSROOM HOURS ☐☐☐
VOCLSHR3

AE13. In the past 12 months, about how much of your own or your family's money did you pay for...

VOTUITO1- a. Tuition and fees to attend the (VOC/TECH) program,
VOTUITO3 including money you borrowed and have to pay back? \$☐☐☐☐
VOMATLS1- b. How much for books and other materials? \$☐☐☐☐
VOMATLS3

*If AE13a > 0 (paid some amount for tuition and fees) and
AE13b = 0 (paid nothing for books or materials), ask AE14.
Else, go to box before AE15.*

AE14. Did the tuition and fees also include books and other materials?

VOINCBK1- YES 1
VOINCBK3 NO 2

*If AA6 = 1 and AA8 NE 2 (worked in the past 12 months and
not self-employed only), go to AE15. Else, go to AF1.*

AE15. (Have you been/Were you) employed during the time you (have been/were) taking the (VOC/TECH) program (in (MAJOR))?

VOWORK1- YES 1 (GO TO AE16)
VOWORK3 NO 2 (GO TO AF1)

AE16. Did your employer require you to take the (VOC/TECH) program (in (MAJOR))?

VOEMPRE1- YES1 (GO TO AE18)
VOEMPRE3 NO2 (GO TO AE17)

AE17. Did your employer suggest or encourage you to take the (VOC/TECH) program (in (MAJOR))?

VOEMPSU1- YES1
VOEMPSU3 NO2

AE18. (Are you taking/Did you take) the (VOC/TECH) program (in (MAJOR)) at your workplace?

VOWRKPL1- YES1
VOWRKPL3 NO2

AE19. (Are you taking/Did you take) the (VOC/TECH) program (in (MAJOR)) during your regular work hours?

VOWRKHR1- YES1
VOWRKHR3 NO2

AE20. (Are/Were) you being paid by your employer during the hours you (are/were) taking the (VOC/TECH) program (in (MAJOR))?

VOEMPAI1- YES1
VOEMPAI3 NO2

AE21. Did your employer...

		YES	NO
VOEMPTU1-	a.		
VOEMPTU3			
VOEMPMA1-	b.		
VOEMPMA3			

Pay all or part of the tuition and fees for the (VOC/TECH) program (in (MAJOR))?.....1 2

Pay all or part of the costs of books and other materials?.....1 2

Apprenticeship Programs

AF1. During the past 12 months, were you in a formal apprenticeship program leading to journeyman status in a skilled trade or craft?

APPRENTI YES 1 (GO TO AF2)
NO 2 (GO TO AG1)

AF2. In what trade or craft did you apprentice?

APTRADE/R TRADE OR CRAFT _____

If AA6 = 1 and AA8 NE 2 (worked in the past 12 months and not self-employed only), go to AF3a. Else, go to AF3b.

AF3. Who provided the program? Was it...

		YES	NO
APEMPLOY	a. Your employer?	1	2
APUNION	b. A labor union?	1	2
APSTAGOV	c. The local or state government?	1	2
APFEDGOV	d. The federal government?	1	2
APOTHER	e. Anyone else?	1	2
APOTHEOS/R	Who provided the program? _____		

AF4. In what month and year did you start the (TRADE) apprenticeship program?

APSTRTMM MONTH..... □□
APSTRYY YEAR □□□□

AF5. In what month and year did you complete or do you expect to complete the program? [IF DON'T KNOW, PROBE WHETHER NEVER COMPLETED OR DO NOT INTEND TO COMPLETE.]

APCOMPMM MONTH..... □□
APCOMPYY YEAR □□□□
NEVER COMPLETED 13
DO NOT INTEND TO COMPLETE..... 14

*If APCOMPMM = 13 or 14,
autocode APCOMPYY = 13 or 14 , respectively.*

AF6. In the past 12 months, how many total classroom or instruction hours did you spend in the (TRADE) apprenticeship program?

APCLSHR TOTAL HOURS..... □□□

*If AF6 = 0 (no classroom or instruction hours), go to AF8.
Else, go to AF7.*

AF7. Were any of these courses you took in the past 12 months taken for college credit?

APCOLCR YES 1
NO 2

AF8. In the past 12 months, about how much of your own or your family's money did you pay for...

APTUITON a. Tuition and fees to attend the (TRADE) apprenticeship program, including money you borrowed and have to pay back?.....\$□□,□□□
APMATLS b. How much for books and other materials?\$□□,□□□

*If AF8a > 0 (paid some amount for tuition and fees) and
AF8b = 0 (paid nothing for books or materials), ask AF9.
Else, go to AG1.*

AF9. Did the tuition and fees also include books and other materials?

APINCBK YES 1
NO 2

Participation In Formal Courses

AG1. These next questions are about any courses that were not part of a degree or diploma program. This includes work or career-related courses, seminars, training, or workshops whether or not you had a job when you took them. Also, you might have taken other courses related to your personal interests or hobbies, first aid or CPR, religion, health, and so on. (Not counting the programs we talked about earlier,) (Did/did) you take any courses in the past 12 months?

FCACTY YES1 (GO TO AG3)
NO2 (GO TO AG2)

AG2. Have you taken any training sessions, seminars, or courses on computer skills, the Internet, communication or diversity, stress management, or any other work-related issues?

What about any Bible study or other religious classes, personal finance or home computing classes, dance or musical instrument, health or fitness, or foreign language classes or workshops?

[READ BOTH PROBES.]

FCACTOTH YES, ONE OR BOTH1 (GO TO AG3)
NO TO BOTH2 (GO TO BOX BEFORE AJ1)

Roster Courses

AG3. With your help, I'm going to make a list of the courses you took where there was an instructor. (Again, not counting the programs we talked about earlier,) please tell me the name and subject matter for each course you have taken in the past 12 months. [MAY RECORD UP TO 20 COURSES.]

FCNAME1/R-	COURSE NAME _____	SUBJECT _____
FCNAME20/R¹	COURSE NAME _____	SUBJECT _____
FCSUBJ1/R-	COURSE NAME _____	SUBJECT _____
FCSUBJ20/R	COURSE NAME _____	SUBJECT _____
WRNAME1/R-	COURSE NAME _____	SUBJECT _____
WRNAME4/R	COURSE NAME _____	SUBJECT _____
WRSUBJ1/R-	COURSE NAME _____	SUBJECT _____
WRSUBJ4/R	COURSE NAME _____	SUBJECT _____
SANAME1/R-	COURSE NAME _____	SUBJECT _____
SANAME2/R	COURSE NAME _____	SUBJECT _____
SASUBJ1/R-	COURSE NAME _____	SUBJECT _____
SASUBJ2/R	COURSE NAME _____	SUBJECT _____

Upon completion of the initial course/subject listing, go to AG3VERF if AG1 = 1. Else, go to AG3VERF2. For second and any additional course/subject listings, go to AG3VERF2.

¹ NOTE: The variables FCNAME1-20 and FCSUBJ1-20 contain all course names and subjects collected in the interview. The variables WRNAME1-4 and WRSUBJ1-4 contain the names and subjects of sampled work-related courses and the variables SANAME1-2 and SASUBJ1-2 contain the names and subjects of sampled personal interest/development courses.

AG3VERF. Have you taken any other training sessions, seminars, or courses on computer skills, the Internet, communication or diversity, stress management, or any other work-related issues in the past 12 months?

What about any Bible study or other religious classes, personal finance or home computing classes, dance or musical instrument, health or fitness, or foreign language classes or workshops?

[READ BOTH PROBES.]

* MATRIX CORRECT 1 (GO TO BOX BEFORE AG4)
RETURN TO MATRIX.....2 (GO TO AG3)

AG3VERF2. Have you taken any other work-related or personal interest courses in the past 12 months?

* MATRIX CORRECT 1 (GO TO BOX BEFORE AG4)
RETURN TO MATRIX.....2 (GO TO AG3)

For each course listed in AG3, ask AG4 and AG5.

AG4. Did you take the (COURSE NAME) course mainly for work-related reasons or mainly for personal interest?

FCREAS1/R- WORK-RELATED..... 1
FCREAS20/R PERSONAL INTEREST2
BOTH EQUALLY3

AG5. In the past 12 months, how many total hours did you attend the (COURSE NAME) course?

FCCLSH1/R- TOTAL HOURS..... □□□
FCCLSH20/R²
WRCLSHR1-
WRCLSHR4
SACLSHR1-
SACLSHR2

If R reported fewer than 20 courses at AG3 and all AG4 = 1 (reported courses are all work-related courses) or all AG4 = 2 (reported courses are all personal interest courses), go to AG6. Else, go to box before INTRO4.

AG6. In the past 12 months, did you take any courses mainly for (work-related reasons/personal interest)?

* YES 1
NO2

² NOTE: The variables FCCLSH1-FCCLSH20 contain the total hours for all courses collected in the interview. The variables WRCLSHR1-WRCLSHR4 contain the total hours for sampled work-related courses and the variables SACLSHR1-SACLSHR2 contain the total hours for sampled personal interest/development courses.

If AG6 = 1 (any additional courses), go to AG7. Else, if any AG4 = 1 or 3 then go to box before INTRO4. Else, if any AG4 = 2, go to box before INTRO5.

AG7. Please tell me the name and subject matter for each of these courses you took in the past 12 months. [RECORD UP TO 20 COURSES.]

FCNAME1/R-	COURSE NAME _____	SUBJECT _____
FCNAME20/R	COURSE NAME _____	SUBJECT _____
FCSUBJ1/R-	COURSE NAME _____	SUBJECT _____
FCSUBJ20/R	COURSE NAME _____	SUBJECT _____
	COURSE NAME _____	SUBJECT _____

Upon completion of the initial course/subject listing in AG7, go to AG7VERF.

AG7VERF. Have you taken any other (work-related/personal interest) courses in the past 12 months?

*	MATRIX CORRECT1 (GO TO NEXT BOX)
	RETURN TO MATRIX.....2 (GO TO AG7)

For all courses reported at AG7, autocode AG4 =1 if all previously reported courses were personal development (AG4 = 2) or autocode AG4 = 2 if all previously reported courses were work-related (AG4 = 1). Ask AG5 for each course reported at AG7 then go to box before INTRO4.

Work-Related Courses

If no work-related courses (all AG4 = 2), go to box before INTRO5. If 4 or fewer courses, select all. Else if 5 courses or more, sort by class hours (AG5), and select systematic random sample of 4 courses.

INTRO4. Right now I'm interested in talking with you about (some of) the course(s) you took for work-related reasons. That is, [DISPLAY COURSE NAME(S)].

For each course sampled, ask AH1-AH16.

AH1. Are you currently taking the (COURSE NAME) course, have you completed the course, or did you stop without completing it?

WRCURR1-	CURRENTLY TAKING	1
WRCURR4	COMPLETED	2
	STOPPED WITHOUT COMPLETION	3

AH2. (Are you taking/Did you take) the (COURSE NAME) course...
[ROTATE RESPONSE CATEGORIES.]

			YES	NO
WRRSSK11-	a.	To maintain or improve skills or knowledge you		
WRRSSK14		already had?	1	2
WRNWSK11-	b.	To learn new skills or methods you did not already know?	1	2
WRNWSK14				
WRRSRAI1-	c.	To help you get a raise or promotion	1	2
WRRSRAI4				
WRRSNEW1-	d.	To get a new job with a different employer?	1	2
WRRSNEW4				
WRRSCER1-	e.	To get or to keep a state, industry, or company		
WRRSCER4		certificate or license?	1	2
WRRSREQ1-	f.	Because you were required to take it?	1	2
WRRSREQ4				

AH3. Who (do/did) you take the (COURSE NAME) course from? That is, what type of school, organization, or business (teaches/taught) the course?
[IF "EMPLOYER", PROBE: What type of organization is that?]

**WRPRTYP1-
WRPRTYP4** POSTSECONDARY SCHOOL (COLLEGE/UNIVERSITY,
COMMUNITY/JUNIOR COLLEGE, VOCATIONAL/TECHNICAL/
OCCUPATIONAL SCHOOL).....1
OTHER SCHOOL OR SCHOOL DISTRICT (ELEMENTARY, JUNIOR
HIGH, HIGH SCHOOL, OR ADULT LEARNING CENTER).....2
PRIVATE BUSINESS/COMPANY/HOSPITAL3
GOVERNMENT AGENCY (FEDERAL, STATE, LOCAL)4
PROFESSIONAL ASSOCIATION/ORGANIZATION/UNION.....5
PUBLIC LIBRARY6
COMMUNITY OR RELIGIOUS ORGANIZATION, NONPROFIT.....7
OTHER.....91
**WRPRTOS1/R-
WRPRTOS4/R** SPECIFY _____
.....

If AA6 = 1 and AA8 NE 2 (worked in the past 12 months and not self-employed only), go to AH4. Else, go to AH5.

AH4. (Is/Was) the (INSTRUCTIONAL PROVIDER) also your employer?

**WRPROVE1-
WRPROVE4** YES1
NO.....2

AH5. (Will/Did) you earn college credit for the (COURSE NAME) course?

**WRCRED1-
WRCRED4** YES1
NO.....2

AH6. (Will/Did) you (also) earn Continuing Education Units, or CEUs, for the (COURSE NAME) course?

**WRCEU1-
WRCEU4** YES1
NO.....2

If AA6 = 1 (worked in the past 12 months), go to AH7. Else, go to AH8.

AH7. How useful are the skills or knowledge you learned in the (COURSE NAME) course in your job?
Would you say...

WRJOBK1- Very useful, 1
WRJOBK4 Useful, 2
 Somewhat useful, or 3
 Not too useful? 4
 NOT CURRENTLY EMPLOYED..... 5

AH8. In the past 12 months, about how much of your own or your family's money did you pay for...

WRTUITO1- a. Tuition and fees to attend the (COURSE NAME) course,
WRTUITO4 including money you borrowed and have to pay back?.....\$□□,□□□
WRMATLS1- b. How much for books and other materials?\$□,□□□
WRMATLS4

*If AH8a > 0 (paid some amount for tuition and fees) and
 AH8b = 0 (paid nothing for books or materials), ask AH9.
 Else, go to box before AH10.*

AH9. Did the tuition and fees also include books and other materials?

WRINCBK1- YES 1
WRINCBK4 NO 2

*If AH1 = 1 and AH4 = 1 then autocode AH10 to 1 and go to
 AH11. Else, if AA6 = 1 and AA8 NE 2 (worked in the past 12
 months and not self-employed only), go to AH10. Else, go to
 box before AH17.*

AH10. (Have you been/Were you) employed during the time you (have been/were) taking the
(COURSE NAME) course?

WRWORK1- YES 1 (GO TO AH11)
WRWORK4 NO 2 (GO TO BOX BEFORE
 AH17)

AH11. (Did your employer require/Was it your employer who required) you to take the (COURSE NAME) course?

WREMPRE1- YES1 (GO TO AH13)
WREMPRE4 NO2 (GO TO AH12)

AH12. Did your employer suggest or encourage you to take the (COURSE NAME) course?

WREMPSU1- YES1
WREMPSU4 NO2

AH13. (Are you taking/Did you take) the (COURSE NAME) course at your workplace?

WRWRKPL1- YES1
WRWRKPL4 NO2

AH14 (Are you taking/Did you take) the (COURSE NAME) course during your regular work hours?

WRWRKHR1- YES1
WRWRKHR4 NO2

AH15. (Are/Were) you being paid by your employer during the hours you (are/were) taking the (COURSE NAME) course?

WREMPAI1- YES1
WREMPAI4 NO2

AH16. Did your employer...

		YES	NO
WREMP TU1-	a. Pay all or part of the tuition and fees for the		
WREMP TU4	(COURSE NAME) course?	1	2
WREMP MA1-	b. Pay all or part of the costs of books and other materials?.....	1	2
WREMP MA4			

If R took more than 4 work-related courses, ask AH17 after all sampled courses are cycled through. Else, go to box before INTRO5. If R took more than 4 work-related courses and AA6 = 1 and AA8 NE 2 (worked in the past 12 months and not self-employed only), ask AH17a-e. Else, ask AH17b and AH17e.

AH17. In addition to the courses we just talked about, you mentioned earlier that you took (an)other course(s) for work-related reasons. That is, [DISPLAY COURSE NAMES]. (Was/Were) (any of) the(se) other work-related course(s)...

		YES	NO
WROREQ	a. Required by your employer?	1	2
WROCOLL	b. Taught by a college or university?	1	2
WROPAY	c. Supported by your employer through paying all or part of the cost?	1	2
WROTIME	d. Supported by your employer through giving you time off with pay?	1	2
WROCERT	e. To get or to keep a state, industry, or company certificate or license?	1	2

Personal Interest/Development Courses

If no courses taken mainly for personal interest (all AG4 = 1 or 3), go to box before AJ1. If 1 or 2 personal development courses, select all. Else if 3 courses or more, sort by class hours (AG5), and take systematic random sample of 2 courses.

INTRO5. Right now I'm interested in talking with you about (some of) the course(s) you took for personal interest or personal development. That is, [DISPLAY COURSE NAME(S)].

For each course sampled, ask AI1- AI12.

AI1. Are you currently taking the (COURSE NAME) course, have you completed the course, or did you stop without completing it?

SACURR1-	CURRENTLY TAKING.....	1
SACURR2	COMPLETED	2
	STOPPED WITHOUT COMPLETION	3

AI2. Who (do/did) you take the (COURSE NAME) course from? That is, what type of school, organization, or business (teaches/taught) the course?
[IF "EMPLOYER", PROBE: What type of organization is that?]

SAPRTYP1-	POSTSECONDARY SCHOOL (COLLEGE/UNIVERSITY,	
SAPRTYP2	COMMUNITY/JUNIOR COLLEGE, VOCATIONAL/TECHNICAL/ OCCUPATIONAL SCHOOL).....	1
	OTHER SCHOOL OR SCHOOL DISTRICT (ELEMENTARY, JUNIOR HIGH, HIGH SCHOOL, OR ADULT LEARNING CENTER).....	2
	PRIVATE BUSINESS/COMPANY/HOSPITAL	3
	GOVERNMENT AGENCY (FEDERAL, STATE, LOCAL)	4
	PROFESSIONAL ASSOCIATION/ORGANIZATION/UNION.....	5
	PUBLIC LIBRARY	6
	COMMUNITY OR RELIGIOUS ORGANIZATION, NONPROFIT.....	7
	OTHER.....	91
SAPRTOS1/R-	SPECIFY _____	
SAPRTOS2/R		

If AA6 = 1 and AA8 NE 2 (worked in the past 12 months and not self-employed only), go to AI3. Else, go to AI4.

AI3. (Is/Was) the (INSTRUCTIONAL PROVIDER) also your employer?

SAPROVE1- YES 1
SAPROVE2 NO 2

AI4. (Will/Did) you earn college credit for the (COURSE NAME) course?

SACRED1 YES 1
SACRED2 NO 2

AI5. (Will/Did) you (also) earn Continuing Education Units, or CEUs, for the (COURSE NAME) course?

SACEU1- YES 1
SACEU2 NO 2

AI6. In the past 12 months, about how much of your own or your family's money did you pay for...

SATUITO1- a. Tuition and fees to attend the (COURSE NAME) course,
SATUITO2 including money you borrowed and have to pay back?.....\$□□,□□□
SAMATLS1- b. How much for books and other materials?\$□,□□□
SAMATLS2

*If AI6a > 0 (paid some amount for tuition and fees) and
AI6b = 0 (paid nothing for books or materials), ask AI7. Else,
go to box before AI8.*

AI7. Did the tuition and fees also include books and other materials?

SAINCBK1- YES 1
SAINCBK2 NO 2

*If AI1 = 1 and AI3 = 1 then autocode AI8 to 1 and go to AI9.
Else, if AA6 = 1 and AA8 NE 2 (worked in the past 12 months
and not self-employed only), go to AI8. Else, go to box
before AI13.*

AI8. (Have you been/Were you) employed during the time you (have been/were) taking the (COURSE NAME) course?

SAWORK1- YES1 (GO TO AI9)
SAWORK2 NO2 (GO TO BOX BEFORE AI13)

AI9. (Are you taking/Did you take) the (COURSE NAME) course at your workplace?

SAWRKPL1- YES1
SAWRKPL2 NO2

AI10. (Are you taking/Did you take) the (COURSE NAME) course during your regular work hours?

SAWRKHR1- YES1
SAWRKHR2 NO2

AI11. (Are/Were) you being paid by your employer during the hours you (are/were) taking the (COURSE NAME) course?

SAEMPAI1- YES1
SAEMPAI2 NO2

AI12. Did your employer...

		YES	NO
SAEMPTU1-	a. Pay all or part of the tuition and fees for the		
SAEMPTU2	(COURSE NAME) course?	1	2
SAEMPA1-	b. Pay all or part of the costs of books and other materials?.....	1	2
SAEMPA2-			

If R took more than 2 personal interest courses, ask AI13 after all sampled courses are cycled through. Else, go to box before AJ1. If R took more than 2 personal interest courses and AA6 = 1 and AA8 NE 2 (worked in the past 12 months and not self-employed only), ask AI13a-d. Else, ask AI13b.

AI13. In addition to the courses we just talked about, you mentioned earlier that you took (an)other course(s) for personal interest. That is, [DISPLAY COURSE NAMES]. (Was/Were) any of the(se) other personal interest course(s)...

		YES	NO
SAOREQ	a. Required by your employer?	1	2
SAOCOLL	b. Taught by a college or university?	1	2
SAOPAY	c. Supported by your employer through paying all or part of the cost?	1	2
SAOTIME	d. Supported by your employer through giving you time off with pay?	1	2

Distance Learning

If respondent was a participant, go to AJ1. Else go to AK1.

AJ1. Now I have some questions about distance education. What we mean by distance education is that some or all of the instruction for a course is provided using some kind of technology, while the person taking the course is at a different place from the instructor. Using technology in a class with an instructor present is not considered to be distance education.

Did any courses or programs you took in the last 12 months involve distance education using any of the following methods? How about...

		YES	NO
DEVIDTCD	a. instruction using video tapes, CDs, or DVDs?	1	2
DETVRAD	b. instruction by television or radio?	1	2
DEWWW	c. instruction over the Internet or World Wide Web?	1	2
DECOMP	d. instruction using computer conferencing or video conferencing?	1	2
DEMAIL	e. instruction by mail, for example, correspondence courses?...1	2	2
DEPHONE	f. instruction by telephone or voicemail?	1	2
DEOTH	g. any other types of remote instruction technology?	1	2
DEOTHOS/R	SPECIFY _____		

If any AJ1a-g = 1 go to next box. Else go to AK1.

If R took only one type of AE, autocode type in AJ2 and go to AK1. Else, ask AJ2.

AJ2. Which of the educational activities you told me about used distance education?
How about...

[DISPLAY ONLY TYPES REPORTED EARLIER IN INTERVIEW.]

		YES	NO
DEESL	a. English as a second language classes?	1	2
DEBASIC	b. Basic skills or GED classes?	1	2
DECOLL	c. College or university programs?	1	2
DEVOCA	d. Vocational or technical programs?	1	2
DEAPPR	e. Apprenticeship programs?	1	2
DEWORK	f. Work-related courses?	1	2
DEPERS	g. Courses you took for personal interest?	1	2

Informal Learning Activities for Personal Interest

AK1. Up to now, we've talked about programs, courses, or classes. Now I'd like to talk with you about other ways that people learn things for personal interest besides classes that have an instructor. This might include things you do to learn something related to a hobby, your home, health, religion, or other areas that are of personal interest to you. These next questions **do not** include learning for a job.

In the past 12 months, have you...

		YES	NO
PICOMP	a. done any learning on your own for personal interest using computer software tutorials, including CD-ROM or the Internet?	1	2
PISELF	b. done any learning on your own using books, manuals, audio tapes, videos, or TV about a topic of personal interest?	1	2
PIMAG	c. read how-to magazines, consumer magazines, or other publications related to some area of personal interest?	1	2
PICLUB	d. attended a book club, sports-related club, health-related support group, arts and crafts group, or a similar club or group where you learned new information?	1	2
PISHOW	e. attended a convention or conference where you learned about something of personal interest, like a garden show, a car show, a science fiction convention, or a music conference?	1	2
PIOTH	f. done some other type of informal learning for personal interest?	1	2
PIOTHOS/R	SPECIFY _____		

Remaining Background Questions

Any background information gathered in a previous interview is not asked again.

AL1. Now, I would like to ask you a few more questions about your background. In what month and year were you born?

ADOBMM
ADOBY

MONTH ☐☐

YEAR 19☐☐

1	JANUARY	7	JULY
2	FEBRUARY	8	AUGUST
3	MARCH	9	SEPTEMBER
4	APRIL	10	OCTOBER
5	MAY	11	NOVEMBER
6	JUNE	12	DECEMBER

Calculate current age for display in AL2. If current age does not match Screener age or birth month is current month, go to AL2. Else, go to AL3.

AL2. That would mean that you [are (AGE)/turn (AGE) this month]. Is that right?

* YES1 (GO TO AL3)
NO2 (RETURN TO AL1)

AL3. Are you of Spanish, Hispanic, or Latino origin?

AHISPANI YES1
NO2

AL4. Which of the following races do you consider yourself to be? You may name more than one.

[IF "HISPANIC" PROBE: Is that White Hispanic, Black Hispanic, both, or something else?]
[CODE ALL THAT APPLY]

Are you...

AWHITE White,1
ABLACK Black or African American,2
AAMIND American Indian or Alaska Native,3
AASIAN Asian, or4
APACI Native Hawaiian or other Pacific Islander?5
ARACEOTH OTHER RACE91
ARACEOS SPECIFY _____

AL5. Are you currently...

AMARSTAT

Married,	1	(GO TO AL6)
Separated,	2	(GO TO BOX)
Divorced,	3	(GO TO BOX)
Widowed, or	4	(GO TO BOX)
Never married?	5	(GO TO BOX)

If any HH member other than respondent is age 16 or over, ask AL5OV. Else, go to AL6.

AL5OV. Are you currently living with a partner?

ALIVWITH

YES	1
NO	2

AL6. Do you have any of the following:

		YES	NO
LRNDISB	a. A learning disability, such as dyslexia, Attention Deficit Disorder, or Attention Deficit Hyperactivity Disorder?	1	2
VISHEAR	b. A vision or hearing disability that affects your learning?...	1	2

If AL6 a or b = 1, go to AL8. Else, go to AL7.

AL7. Does any long-term physical, mental, or emotional problem limit you in any way? Please include only conditions that have lasted 6 months or more, but not (pregnancy or) temporary conditions such as a cold.

ADISAB05

YES	1
NO	2

AL8. In what state, country, or territory were you born?

ABORNUS

ONE OF 50 STATES OR THE DISTRICT OF COLUMBIA	1	(GO TO BOX BEFORE AL11)
--	---	-------------------------

ONE OF THE U.S. TERRITORIES [PUERTO RICO, GUAM, AMERICAN SAMOA, U.S. VIRGIN ISLANDS, MARIANA ISLANDS, MIDWAY ISLANDS, OR SOLOMON ISLANDS]	2	(GO TO AL8OV)
---	---	---------------

ATERROS/R

SPECIFY		
SOME OTHER COUNTRY	3	(GO TO AL8OV)

ACONTOS/R

SPECIFY	
---------------	--

AL8OV. How old were you when you first moved to the (United States/50 states or the District of Columbia)?

AMOVEAGE

AGE	<input type="checkbox"/> <input type="checkbox"/>
-----------	---

If AL8OV \geq 6, go to AL9. Else, go to box before AL10.

AL9. What was the highest grade or year of school that you completed before moving to the U.S.?

USGRADE

NO SCHOOL	1
LESS THAN HIGH SCHOOL DIPLOMA	2
HIGH SCHOOL DIPLOMA/EQUIVALENT.....	3
VOCATIONAL/TECHNICAL DIPLOMA OR CERTIFICATE	4
SOME COLLEGE BUT NO DEGREE	5
ASSOCIATE'S DEGREE (AA, AS)	6
BACHELOR'S DEGREE (BA, BS).....	7
MASTER'S DEGREE (MA, MS).....	8
DOCTORATE DEGREE (PHD, EDD)	9
PROFESSIONAL DEGREE BEYOND BACHELOR'S DEGREE (MEDICINE/MD; DENTISTRY/DDS; LAW/JD/LLB; ETC.)	10

*If AA10 = 2 or 91 (first language is not English), go to AL10.
Else, go to box after AL10.*

AL10. Did you study English before you first came to the (United States/50 states or the District of Columbia)?

ASTUENG

YES	1
NO.....	2

*If AA6 = 2 (did not work in the past 12 months),
autocode AL11 = 2 and AL12 = 2 and go to box before
AL14. Else, go to AL11.*

AL11. During the past week, did you work at a job for pay or income, including self-employment?

IBWORK

YES	1	(GO TO AL13)
NO.....	2	(GO TO AL12)
RETIRED	3	(GO TO AL14)
DISABLED/UNABLE TO WORK.....	4	(GO TO AL14)

AL12. Were you on leave or vacation from a job during the past week?

IBLEAVE

YES	1	(GO TO AL13)
NO.....	2	(GO TO AL14)

AL13. About how many total hours per week do you usually work for pay or income (counting all jobs)?
[IF HOURS VARY, PROBE FOR AVERAGE PER WEEK.]

PAYHRS

|_|_|_|
WEEKLY HOURS

*If AA6 = 2 (did not work in the past 12 months), then
autocode AL14 = 0 and go to AL15. Else, go to AL14.*

AL14. In the past 12 months, how many months have you worked for pay or income?

IBWORKMO

MONTHS

If AL11 = 1 (worked last week) or AL12 = 1 (on leave or vacation), go to AL21. Else if AL11 = 3 (retired), then autocode AL17 = 3 and go to AL21. Else if AL11 = 4 (unable to work), then autocode AL17 = 5 and go to AL21. Else, go to AL15.

AL15. Have you been actively looking for work in the past 4 weeks?

JOBLOOK YES1 (GO TO AL16)
 NO.....2 (GO TO AL17)

AL16. What have you been doing in the past 4 weeks to find work? Have you...

		YES	NO
JOBAGN	a. Checked with an employment agency?	1	2
JOBEMPL	b. Checked with an employer directly or sent a resume?.....	1	2
JOBREL	c. Checked with friends or relatives?.....	1	2
JOBANSAD	d. Placed or answered job ads?	1	2

If any of AL16 a-d = 1 (actively looking for work), go to box after AL17. Else, go to AL17.

AL17. What were you doing most of last week? Would you say . . .

JOBACTY Keeping house or caring for children or other dependents,..... 1
 Going to school, 2
 Retired, 3
 Volunteering, 4
 Unable to work, or..... 5
 Something else? 91
 JOBACTOS/R What was that? _____

If AA6 = 2 (not worked in past 12 months), then go to AL18. Else, go to AL21.

AL18. Have you ever worked at a job for pay or income?

JOBEVER YES1 (GO TO AL19)
 NO.....2 (GO TO AL20)

AL19. In what year did you last work for pay or income?

JOBLSYY

|_|_|_|_|
YEAR

AL20

.

Do you plan to work at a job for pay or income in the next year?

JOBNXYR

YES1

NO2

Go to HHINTRO.

AL21. For whom (have/did) you (worked/work) (at your longest job during the past 12 months) and what kind of business or industry (is/was) this?

[EMPLOYER PROBE: Name of the company, business, organization, or other employer.]

[BUSINESS/INDUSTRY PROBE: For example, TV and radio manufacturing, retail shoe store, state labor department, or farm.] [IF MORE THAN ONE JOB, COLLECT JOB WHERE R WORKS MOST HOURS.]

EMPLNAME/R

NAME OF COMPANY _____

INDUSTRY/R

TYPE OF INDUSTRY _____

*If AA7 = 1 (self-employed in the past 12 months), go to AL22.
Else, go to AL23.*

AL22. [IS THIS RESPONDENT'S OWN BUSINESS?]

AOWNBUS

YES1

NO2

AL23. What kind of work (are/were) you doing and what (are/were) your most important activities or duties?

[JOB PROBE: For example, electrical engineer, stock clerk, typist, or farmer.]

[IMPORTANT DUTY PROBE: For example, typing, keeping account books, filing, selling cars, operating printing press, or finishing concrete.]

[IF MORE THAN ONE JOB, COLLECT JOB WHERE R WORKS MOST HOURS.]

PROFESSN/R

KIND OF WORK _____

DUTIES/R

IMPORTANT DUTY _____

DUTIES2/R

IMPORTANT DUTY _____

*If AA9 > 1 (more than 1 employer) and AL11 = 1 or AL12 = 1
(worked last week or on leave or vacation) then go to AL24.
Else go to AL25.*

AL24. Do you currently work for (EMPLOYER/your business)?

CUREMP YES1
NO.....2

AL25. (If you had worked for all 12 months this past year,) About how much (would/do) you (have earned/earn) before taxes and other deductions at (EMPLOYER/your business)?

EARNAMT AMOUNT..... \$□□□,□□□
EARNAMTU/R

EARNUNT Per
EARNUNTU/R HOUR.....1
DAY2
WEEK.....3
BI WEEKLY.....4
MONTH.....5
YEAR6
OTHER91

EARNUNOS/R What (is/was) that? _____

<p><i>Ask AL26 if AA6 = 1 (worked for pay or income in the past 12 months).</i></p>

AL26. Does your occupation have legal or professional requirements for continuing training or education?

CONREQ05 YES1
NO.....2

Household Characteristics

The following questions are asked only once per household.

HHINTRO. Now, a few questions about your household.

AM1. (Do you/Does anyone in your household) work for a child care center?

CNTRWORK YES 1
NO 2

AM2. (Do you/Do any adults or teenagers in your household) care for or baby-sit someone else's child or children on a regular basis, either in your home or someone else's home?

Please do not include occasional babysitting.

CHCRWORK YES 1
NO 2

AM3. Do you...

HOWNHOM Own your home, 1
Rent your home, or 2
Have some other arrangement? 3

AM4. Besides (PHONE NUMBER), do you have other telephone numbers in your household, not including cellular telephones?

HOTHNUM YES 1 (GO TO AM6)
NO 2 (GO TO AM7)
NOT MY NUMBER 3 (GO TO AM5)

AM5. [INTERVIEWER: ASK FOR AND RECORD THE TELEPHONE NUMBER REACHED. RECORD REASON FOR REACHING DIFFERENT TELEPHONE NUMBER.]

* TELEPHONE NUMBER REACHED _____
AREA CODE CHANGE 1
OTHER NUMBER IN HOUSEHOLD 2
ORIGINAL NUMBER IS THAT OF ANOTHER HOUSEHOLD AND
NUMBER IS BEING FORWARDED TO THIS HOUSEHOLD 3
NEVER HEARD OF ORIGINAL NUMBER 4
OTHER [RECORD EXPLANATION IN COMMENTS] 5

*If AM5 = 3, go to CLOSE. Else, for cases where AM4 = 3
(not number dialed), ask AM4 again with new number.*

AM6. How many of these additional telephone numbers are for home use, not including cellular telephones?

HNUMUSE NUMBER ☐ ☐ (GO TO BOX)

If AM6 > 0 (other telephone numbers for home use), ask
AM8. Else, go to AM7.

AM7. Besides this phone number, do you have any telephone numbers in your household that are used for computer or fax lines?

* YES 1 (GO TO AM8)
NO 2 (GO TO AM11)

AM8. How many of these additional telephone numbers are used for computer or fax lines?

* NUMBER..... ☐☐ (GO TO BOX)

If AM8 = 0, go to AM11. Else, ask AM9.

AM9. Some households have telephone numbers that are used both for talking and for computer or fax lines. (Is the number/Are any of the numbers) used for (a) computer or fax line(s) ever answered for talking?

* YES 1 (GO TO BOX)
NO 2 (GO TO AM11)

If AM8 = 1 (only 1 other telephone number for computer or fax), autocode AM10 =1, and go to AM11. Else, ask AM10.

AM10. How many computer or fax telephone numbers are also answered for talking?

* NUMBER ☐☐

AM11. So that we can group households geographically, may I have your ZIP code?

STFZIP/R ZIP CODE..... ☐☐☐☐☐

AM12. In studies like this, households are sometimes grouped according to income. What was the total income of all persons in your household over the past year, including salaries or other earnings, interest, retirement, and so on for all household members?

Was it....
HINCMRNG \$25,000 or less, or1 (READ SET 1)
 More than \$25,000?2 (GO TO AM12OV)

AM120V. Was it....
HINCM50K \$50,000 or less, or1 (READ SET 2)
 More than \$50,000?2 (READ SET 3)

Was it....
HINCOME [SET 1]
 \$5,000 or less1
 \$5,001 to \$10,0002
 \$10,001 to \$15,0003
 \$15,001 to \$20,000, or4
 \$20,001 to \$25,000?5

[SET 2]
 \$25,001 to \$30,0006
 \$30,001 to \$35,0007
 \$35,001 to \$40,0008
 \$40,001 to \$45,000, or9
 \$45,001 to \$50,000?10

[SET 3]
 \$50,001 to \$60,000,11
 \$60,001 to \$75,000,12
 \$75,001 to \$100,000, or13
 Over \$100,000?14

CLOSE. Those are all the questions I have about you. Please hold on for a moment while I check to see if there is anyone else I need to ask about, or anyone else I need to speak with.
 [IF NOT, THANK RESPONDENT.]