BOX 0

IF {FILL}, USE SOURCE:

FILL	SOURCE
{CHILD}	Child Name (D)
{TWIN}	Twin Name (D)
{NEXT ROUND}	Spring 2000/Fall 2001/Spring 2002/
	Fall 2002/Spring 2003/Fall 2003/
	Spring 2004 (I)

I = SET AT INITIALIZATION; D = READ FROM DATABASE.

BOX 1

- IF (NumberOfChildren = 1) OR
  IF (NumberOfChildren = 2 AND ChildNum = 1), CONTINUE.
- IF (NumberOfChildren = 2 AND ChildNum = 2), GO TO BOX 1B.

INQ.005
SPRING K

(As I mentioned earlier), you and {{CHILD} {and TWIN}} have been selected to take part in the Early Childhood Longitudinal Study Kindergarten Cohort, which is sponsored by the U.S. Department of Education, National Center for Education Statistics. I now have some questions for you that ask about {{CHILD's {and TWIN's}} school and home experiences. The information I collect in this interview will be extremely valuable in understanding the development of young children and how their early school experiences can be improved.

IF NEEDED, READ THE FOLLOWING:

The information you provide will be kept completely confidential and private as required by law.

PRESS ENTER TO CONTINUE.

CAPI INSTRUCTION: DISPLAY "{and TWIN}}" IF THERE IS A TWIN.

BOX 1A

IF COOPERATING RESPONDENT. CONTINUE WITH INQ.010. OTHERWISE.
GO TO INQ.011.

DEFINITION OF COOPERATING RESPONDENT: RESPONDENT WHO
COMPLETED THE ROUND 2 (SPRING K) PARENT INTERVIEW.

INQ.010
SPRING K

Last spring, we spoke with {NAME OF RESPONDENT} who took part in the Early Childhood Longitudinal Study Kindergarten Cohort on {DATE OF SPRING INTERVIEW}. Am I talking to the same person?

CAPI INSTRUCTION: DISPLAY FIRST AND LAST NAME OF RESPONDENT FROM SPRING K FAMILY ROSTER. USE THE NAME OF PERSONTYPE=R.

```
YES............................................................  1  (BOX 1B)
NO .............................................................  2  (INQ.011)
```

INQ.011
SPRING K

May I have your name, please?

ENTER FIRST NAME.

VERIFY SPELLING.

_____
FIRST NAME

INQ.012
SPRING K

[May I have your name, please?]

ENTER LAST NAME.

VERIFY SPELLING.

_____
LAST NAME

BOX 1B

- IF NumberOfChildren = 2, CONTINUE WITH INQ.014.
- IF NumberOfChildren = 1, GO TO INQ.015.

INQ.014
SPRING K

{For this interview, I will first ask questions that collect information specifically about {CHILD} and general questions about you and your household. Once those questions are finished, I will need to ask some questions that collect information specifically about {TWIN}. There will not be as many questions for {TWIN }, since I will not need to ask the questions about you or your household.

As I mentioned earlier, now I need to ask some questions specifically about {CHILD}. These questions will not take as long as the first round of questions, since I have already asked the general questions about you and your household.}

PRESS ENTER TO CONTINUE.

CAPI INSTRUCTION: DISPLAY "For this interview . . . you or your household." IF CURRENTLY ASKING ABOUT SAMPLED CHILD 1. FOR "CHILD," DISPLAY THE NAME OF SAMPLED CHILD 1. FOR "TWIN," DISPLAY THE NAME OF SAMPLED CHILD 2.

CAPI INSTRUCTION: DISPLAY "As I mentioned . . . you and your household." IF CURRENTLY ASKING ABOUT SAMPLED CHILD 2. FOR "CHILD," DISPLAY THE NAME OF SAMPLED CHILD 2.

CAPI INSTRUCTION: DISPLAY "Specifically about {CHILD}" AND "not" IN BRIGHT WHITE.

INQ.015
SPRING K

{Before we begin the interview, I would like to verify some information.} I have recorded {CHILD's FIRST, MIDDLE, AND LAST NAME} as {CHILD}'s full name. Is this correct?

ALSO VERIFY SPELLING.

MAKE CORRECTIONS TO NAME BELOW OR PRESS ENTER TO ACCEPT CURRENT NAME.

IF NO MIDDLE NAME OR INITIAL, ENTER 'NMN'.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS. HOWEVER, DO NOT ALLOW INTERVIEWER TO CHANGE 'REAL DATA' TO '7' (REFUSED) OR '9' (DON'T KNOW).

CAPI INSTRUCTION: DISPLAY "Before we begin . . . some information." IF ONLY ONE SAMPLED CHILD OR IF ON INTERVIEW FOR CHILD 1.

CAPI INSTRUCTION: IF CURRENTLY ASKING ABOUT CHILD 2, FOR '{CHILD}', DISPLAY THE NAME OF SAMPLED CHILD 2.

CAPI INSTRUCTION: IF COOPERATING RESPONDENTS: DISPLAY CHILD'S FIRST NAME FROM SPRING K IN RESPONSE CATEGORY. IF SPRING K NON-RESPONDENTS: USE CHILD'S NAME FROM FMS.

CAPI INSTRUCTION: IF COOPERATING RESPONDENTS: FOR CHILD'S FIRST, MIDDLE, AND LAST NAME, DISPLAY CHILD'S CORRECTED FULL NAME FROM SPRING K. IF PREVIOUS ROUND NON-RESPONDENTS: USE CHILD'S FIRST, MIDDLE, AND LAST NAME FROM FMS.

CAPI INSTRUCTION: USE SPRING K LENGTH FOR CHILD'S NAME.

	Current Info:	[CHILD'S FIRST NAME]
		[CHILD'S MIDDLE NAME]
		[CHILD'S LAST NAME]

FIRST NAME: [_____]
MIDDLE NAME: [_____]
LAST NAME: [_____]

INQ.016
SPRING K

ASK IF NOT OBVIOUS: I have {CHILD} recorded as {male/female}. Is that correct?

MAKE CORRECTIONS TO GENDER BELOW OR PRESS ENTER TO ACCEPT CURRENT GENDER.

CAPI INSTRUCTION: IF COOPERATING RESPONDENTS: DISPLAY CORRECTED INFORMATION ABOUT CHILD'S GENDER FROM SPRING K. IF PREVIOUS ROUND NON-RESPONDENT: USE CHILD'S GENDER FROM FMS.

MALE 1
FEMALE 2

BOX 2

- IF NumberOfChildren = 1 OR
  IF NumberOfChildren = 2 AND ChildNum = 1, CONTINUE WITH INQ.017.
- IF NumberOfChildren = 2 AND ChildNum = 2, GO TO BOX 4.

INQ.017
SPRING K

{I have recorded that {CHILD} was born on {DATE OF BIRTH}. Is that correct?/What is {CHILD}'s date of birth?}

{MAKE CORRECTIONS TO DATE OF BIRTH BELOW OR PRESS ENTER TO ACCEPT CURRENT DATE OF BIRTH.}

CAPI INSTRUCTION:

1. IF COOPERATING RESPONDENT. DISPLAY CORRECTED INFORMATION ABOUT CHILD'S DATE OF BIRTH FROM SPRING K. IF PREVIOUS ROUND NON-RESPONDENT, USE DATE OF BIRTH FROM FMS.
2. REFUSED AND DON'T KNOW ALLOWED. HOWEVER, DO NOT ALLOW INTERVIEWER TO CHANGE 'REAL' DATA TO REFUSED OR DON'T KNOW.
3. IF CURRENT INFO IS NOT AVAILABLE, ENTRY FOR DATE OF BIRTH IS REQUIRED (REFUSED AND DON'T KNOW IS NOT ALLOWED).
4. DISPLAY "I have recorded…is that correct?" AND "MAKE CORRECTIONS TO DATE OF BIRTH BELOW." IF A DATE OF BIRTH IS AVAILABLE FOR THE FOCAL CHILD FROM THE SPRING K OR FMS (IF PREVIOUS ROUND NON-RESPONDENT). OTHERWISE, DISPLAY "What is {CHILD}'s date of birth?"
5. RANGE CHECK: 1-12 FOR MONTH, 1-31 FOR DAY, AND 1991-1996 FOR YEAR.

BOX 2a
- IF ANY FIELD IN DATE OF BIRTH INQ.017=REFUSED OR DON'T KNOW, GO TO INQ.019.
- OTHERWISE, GO TO INQ.018.

INQ.018
SPRING K

So {CHILD} is {AGE CALCULATED FROM DATE OF BIRTH AT INQ.017} years old. Is that correct?

CAPI INSTRUCTION: IF NO, DK OR RF ENTERED, DISPLAY THIS MESSAGE, "IF AGE INCORRECT, CORRECT DATE OF BIRTH."

YES.. 1 (INQ.020)
NO 2
REFUSED 7
DON'T KNOW 9

INQ.019
SPRING K

How old is {CHILD}?

CAPI INSTRUCTION: RANGE CHECK 3-8.

CAPI INSTRUCTION: IF DK OR RF ENTERED, DISPLAY THIS MESSAGE, "You must enter an age for the child if date of birth is missing. If the respondent doesn't know the age, ask for his/her best guess. If the respondent refuses to provide an age, enter your best guess or a '6' if you can't guess the child's age."

|__|
AGE

INQ.020
SPRING K

(In the last interview, we/We) recorded that {CHILD}'s home address was:

{STREET ADDRESS1..}
{STREET ADDRESS2..}
{CITY..} {ST} {ZIP CODE..}

Is this still correct?

CAPI INSTRUCTION: IF COOPERATING RESPONDENT, USE SPRING K INQ ADDRESS. IF PREVIOUS ROUND NON-RESPONDENT, USE ADDRESS IN FMS.

CAPI INSTRUCTION: IF SPRING K RESPONDENT, DISPLAY "In the last interview, we... ." OTHERWISE, DISPLAY "We... ."

                    YES, CORRECT ADDRESS 1 (INQ.040)
                    YES, SAME ADDRESS - MINOR
                      CORRECTIONS 2
                    NO, NEW ADDRESS 3

INQ.030
FALL K

MAKE CORRECTIONS TO ADDRESS BELOW.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

              Current Info: [STREET ADDRESS1]
                                     [STREET ADDRESS2]
                                               [CITY]
                                              [STATE]
                                           [ZIP CODE]

              STREET ADDRESS1: [_____]
              STREET ADDRESS2: [_____]
                        CITY: [_____]
                       STATE: [_____]
                    ZIP CODE: [_____]

INQ.040   {I have recorded that {PHONE NUMBER} is {CHILD}'s family's current home phone number. Is this
FALL K   correct?/What is {CHILD}'s family's current phone number?}

             IF NO TELEPHONE, ENTER '000'.

             CAPI INSTRUCTION: FOR ALL RESPONDENTS, DISPLAY "What is {CHILD}'s family's current phone
             number?" IF SPRING K PHONE NUMBER WAS "000", REFUSED, DK, OR MISSING. IF EITHER
             SPRING K PHONE NUMBER WAS AVAILABLE, DISPLAY "I have recorded… correct?"

             CAPI INSTRUCTION: IF CURRENT INFO IS NOT AVAILABLE, ENTRY IS REQUIRED FOR
                 TELEPHONE NUMBER. (REFUSED AND DON'T KNOW ARE ALLOWED AT ALL FIELDS.)

                    Current Info: [TELEPHONE NUMBER]

                    |___|___|___| - |___|___|___| -|___|___|___|___|
                    ENTER TELEPHONE NUMBER
                      or
                    REFUSED 7
                    DON'T KNOW 9

+--+
| **BOX 4** |
| |
| IF PREVIOUS ROUND NON-RESPONDENT, GO TO SECTION SPQ |
| (SUPPLEMENTARY ITEMS). OTHERWISE, GO TO SECTION PIQ (PARENT'S |
| INVOLVEMENT WITH CHILD'S SCHOOL). |
+--+

```
┌─────────────────────────────────────────────────────────────────────────┐
│                                BOX 1                                      │
│                                                                           │
│  ■   IF (NumberOfChildren >1 and ChildNum=2), GO TO SPQ005.               │
│                                                                           │
│  ■   IF (NumberOfChildren=1) OR                                           │
│        IF (NumberOfChildren >1 and ChildNum=1), GO TO SPQ010.             │
│                                                                           │
└─────────────────────────────────────────────────────────────────────────┘
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SPQ005   Next, I'd like to talk with you about the child care arrangements you had for {CHILD} last year.
Did {CHILD} have the same child care arrangements as {TWIN} the year before {he/she} started kindergarten?

YES	1	(SPQ.060)
NO	2	(SPQ.010)
REFUSED	3	(SPQ.060)
DON'T KNOW	9	(SPQ.060)

SPQ010   **HELP AVAILABLE**

Did {CHILD} receive care from a relative on a **regular basis the year before** (he/she) started kindergarten?

THIS MEANS ANYTIME IN THE YEAR BEFORE CHILD ENTERED KINDERGARTEN.

HELP TEXT:
Care from a relative: Record care or programs provided by someone other than the child's parents. In all cases, do not include care provided by a parent, even if they do not live in the household. (Do not include visitation with a separated or divorced parent who does not have custody.)

If there is at least one parent in the household, any relative living in the household is eligible to be counted as a care arrangement, if the care is provided on a regularly scheduled basis. Relatives outside the household may also be regular care providers.

If neither parent lives in the household, do not include care provided by guardians who live with the child (they are similar to parents).

Relative care arrangements may or may not have a charge or fee.

Regular Basis: An arrangement or program occurring on a routine schedule (i.e., occurring at least weekly or on some other schedule). Do not include occasional babysitting or "back up" arrangements that are just used once in a while.

CAPI INSTRUCTION: DISPLAY 'REGULAR BASIS THE YEAR BEFORE' IN BRIGHT WHITE.

YES	1
NO	2
REFUSED	7
DON'T KNOW	9

SPQ020   **HELP AVAILABLE**

Did {CHILD} receive care from a nonrelative on a **regular basis the year before** (he/she) started kindergarten?

PROBE: This refers to care received from nonrelatives in a private home, including home child care providers, regular sitters, or neighbors. However, this does not include child care centers.

THIS MEANS ANYTIME IN THE YEAR BEFORE CHILD ENTERED KINDERGARTEN.

HELP TEXT:
Care from a non-relative: Non-relative care is provided by someone not related to the child and is located in a private home. The private home may be the child's home, the caregiver's home, or another home.

If there is at least one parent in the household, any nonrelative living in the household is eligible to be counted as a care arrangement, IF the care is given on a regularly scheduled basis.

If neither parent lives in the household, do not include care provided by guardians who live with the child (they are treated the same as parents).

Non-relative care arrangements or programs may or may not have a charge or fee.

Regular Basis: An arrangement or program occurring on a routine schedule (i.e., occurring at least weekly or on some other schedule). Do not include occasional babysitting or "back up" arrangements that are just used once in a while.

CAPI INSTRUCTION: DISPLAY 'REGULAR BASIS THE YEAR BEFORE' IN BRIGHT WHITE.

> YES 1
> NO 2
> REFUSED 7
> DON'T KNOW 9

SPQ030   **HELP AVAILABLE**

Head Start is a federally sponsored preschool program primarily for children from low-income families. Did {CHILD} attend Head Start **the year before** (he/she) started kindergarten?

THIS MEANS ANYTIME IN THE YEAR BEFORE CHILD ENTERED KINDERGARTEN.

HELP TEXT:
Head Start: Head Start is a federally funded early childhood education program designed to improve the school-readiness of disadvantaged children (i.e., children from low-income families). Children who participate are usually 3 to 5 years old. Head Start may be offered in a school, community center, a church facility, or anywhere a nursery school may be offered.

Rarely, you may find a case in which a respondent reports that the child is in "home Head Start," that is, he/she participates in Head Start in his/her own home. Generally, this involves the parent acting as the child's teacher, supplemented by occasional home visits by a Head Start teacher and perhaps some occasional group activities at a central location.

CAPI INSTRUCTION: DISPLAY 'THE YEAR BEFORE' IN BRIGHT WHITE.

> YES 1 (SPQ.032)
> NO 2 (SPQ.040)
> REFUSED 7 (SPQ.040)
> DON'T KNOW 9 (SPQ.040)

SPQ032   **HELP AVAILABLE**

I would now like to make sure I have complete information on the Head Start Center {CHILD} attended.
I have a computerized directory to help me find the address of the center.

First, what is the name of the Head Start center that {CHILD} attended?

IF HOME-BASED HEAD START, ASK FOR NAME OF CENTER THAT IS CONNECTED WITH HOME-
BASED CARE.

TO ACTIVATE LOOKUP, BEGIN TO TYPE STATE ABBREVIATION AND THE CENTER NAME WITH
NO SPACE.

USE THE ARROW KEYS TO HELP YOU LOCATE A MATCH.

CAPI INSTRUCTION: DISPLAY HEAD START LOOKUP FILE.   DISPLAY 'IF HOME-
BASED…LOCATE A MATCH' IN UPPER CASE AND BRIGHT YELLOW. ALLOW 4 SPACES IN THE
RESPONSE FIELD FOR ENTERING HEAD START CENTER NUMBER.   DISPLAY STATE
ABBREVIATIONS ON HELP SCREEN.

SPQ036

YOU HAVE SELECTED:

{Display center name}
{Display center address, line 1}
{Display city, state, zip code}
{Display center phone number}
{Display name of center director}

CAPI INSTRUCTION: DISPLAY ITEM TEXT IN BRIGHT YELLOW. IF CODED '3,' DISPLAY ERROR
MESSAGE TO RETURN TO LOOKUP (SPQ.032).

CAPI INSTRUCTION: DK AND RF DISALLOWED.

ERROR MESSAGE:
"1. PRESS G OR ENTER TO GO TO THE HEAD START LOOKUP."
"2. PRESS C OR ESCAPE TO CANCEL."

                              ACCEPT CENTER AS SHOWN 1 (SPQ.040)
                              ACCEPT CENTER BUT MAKE CHANGES .   2 (SQP.037)
                              WRONG CENTER, GO BACK TO LOOKUP   3

SPQ037   {Since I was not able to find that center in my directory, I have just a few questions about that center.}

What is the name of the Head Start Center that {CHILD} attended?

IF HOME-BASED HEAD START, ASK FOR NAME OF CENTER THAT IS CONNECTED WITH HOME-
BASED CARE.

CAPI INSTRUCTION: DISPLAY 'IF HOME-BASED HEAD START…HOME-BASED CARE.' IN UPPER
CASE AND BRIGHT YELLOW. DISPLAY 'SINCE…CENTER.' IF NO HEAD START CENTER WAS
SELECTED. IF CODED '2' AT HSCHECK, DISPLAY CENTER NAME IN RESPONSE FIELD.

SPQ038   {MAKE CORRECTIONS BELOW OR PRESS ENTER TO ACCEPT CURRENT DATA.}

                What is the name of the Head Start center director?
                Current Info: [DIRECTOR NAME]

                IF R DOESN'T KNOW NAME OF CENTER DIRECTOR, ASK FOR NAME OF HEAD START
                TEACHER.

                CAPI INSTRUCTION: DISPLAY 'MAKE…DATA.' IF SPQ.036 IF CODED '2.' OTHERWISE, USE A
                NULL DISPLAY. IF CODED '2' AT SPQ.036, DISPLAY DIRECTOR NAME IN THE RESPONSE
                FIELD.

SPQ039   {MAKE CORRECTIONS BELOW OR PRESS ENTER TO ACCEPT CURRENT DATA.}

                What is the address of the Head Start center?

                Current Info: [STREET ADDRESS 1]
                              [STREET ADDRESS 2]
                              [CITY]
                              [STATE]
                              [ZIP CODE]
                              [PHONE NUMBER]

                STREET ADDRESS, LINE 1 |_____|
                STREET ADDRESS, LINE 2 |_____|
                                  CITY |_____|
                                 STATE |_____|
                              ZIP CODE |_____|
                          PHONE NUMBER |___|___|___| - |___|___|___| - |___|___|___|___|

                CAPI INSTRUCTION: DISPLAY 'MAKE CORRECTIONS BELOW…CURRENT DATA.' IF SPQ.036 IS
                CODED '2.' OTHERWISE, USE A NULL DISPLAY. IF CODED '2' AT SPQ.036, DISPLAY MAILING
                ADDRESS, AND PHONE NUMBER, IN THE RESPONSE FIELD.

SPQ040   **HELP AVAILABLE**
                Did {CHILD} attend a day care center, nursery school or preschool on a **regular basis the year before**
                (he/she) started kindergarten.

                THIS MEANS ANYTIME IN THE YEAR BEFORE CHILD ENTERED KINDERGARTEN.

                HELP TEXT:
                Center-based Programs: Include any type of formal program such as nursery school,
                prekindergarten, preschool or a day care center. These programs may have names like "KinderCare
                Learning Center," or "Children's Academy."

                Center-based programs may or may not have a charge or fee.

                Head Start, though sometimes viewed as a center type care arrangement, is not included here. There
                is a separate category for Head Start.

                Regular Basis: An arrangement or program occurring on a routine schedule (i.e., occurring at least
                weekly or on some other schedule). Do not include occasional babysitting or "back up" arrangements
                that are just used once in a while.

                CAPI INSTRUCTION: DISPLAY 'A REGULAR BASIS THE YEAR BEFORE' IN BRIGHT WHITE.

                                        YES.. 1
                                        NO 2
                                        REFUSED 7
                                        DON'T KNOW 9

SPQ060   Now I have some questions about {CHILD}'s health. How much did {CHILD} weigh when (he/she) was born?

ENTER POUNDS.

CAPI INSTRUCTIONS: HARD RANGE: 1-13 FOR POUNDS.

<div align="center">

|___|___|
ENTER POUNDS
OR
</div>

REFUSED .... 7 (BOX 2)
DON'T KNOW .... 9 (BOX 2)

SPQ065   [How much did {CHILD} weigh when (he/she) was born?]

ENTER OUNCES.

CAPI INSTRUCTIONS: HARD RANGE: 0-16 FOR OUNCES.

<div align="center">

|___|___|
ENTER OUNCES
OR
</div>

REFUSED .... 7 (BOX 2)
DON'T KNOW .... 9 (BOX 2)

BOX 2

IF REFUSED OR DON'T KNOW FOR THE NUMBER OF POUNDS (SPQ060=DK OR REFUSED)

OR

IF THE NUMBER OF POUNDS IS 5 AND REFUSED OR DON'T KNOW FOR THE NUMBER OF OUNCES (SPQ060= 5) AND (SPQ065=DK OR REFUSED),
CONTINUE WITH SPQ070.

OTHERWISE, GO TO BOX 3.

SPQ070   When (he/she) was born, did {CHILD} weigh more than 5 1/2 pounds?

YES .... 1 (BOX 3)
NO 2 (SPQ.080)
REFUSED 7 (SPQ.080)
DON'T KNOW 9 (SPQ.080)

SPQ080   Did (he/she) weigh more than 3 pounds?

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

SPQ090 Was {CHILD} born more than two weeks before (he/she) was due?

         YES 1 (SPQ.100)
         NO 2 (SPQ.107)
         REFUSED 7 (SPQ.107)
         DON'T KNOW 9 (SPQ.107)

SPQ100 How many days or weeks early was (he/she)?

ENTER NUMBER.

CAPI INSTRUCTION: RANGE CHECKS: 1-31 IF DAYS IS THE UNIT; 1-16 IF WEEKS IS THE UNIT.

         |___|___|
         ENTER NUMBER
           OR
         REFUSED 7 (SPQ.107)
         DON'T KNOW 9 (SPQ.107)

SPQ105 [How many days or weeks early was (he/she)?]

CAPI INSTRUCTION: RANGE CHECKS ADDED: 1-31 IF DAYS IS THE UNIT; 1-16 IF WEEKS IS THE UNIT.

         WEEKS 1
         DAYS 2
         REFUSED 7
         DON'T KNOW 9

SPQ107 Now I want to ask you about {CHILD}'s vision. Does {CHILD} have difficulty seeing objects in the distance or letters on paper?

         YES 1 (SPQ.108)
         NO 2 (SPQ.109)
         REFUSED 7 (SPQ.109)
         DON'T KNOW 9 (SPQ.109)

SPQ108 Is {CHILD}'s eyesight…

         Correctable with glasses. 1
         Improvable with glasses, or.......................... 2
         Not correctable with glasses. 3
         REFUSED 7
         DON'T KNOW 9

SPQ109   Does {CHILD} have difficulty hearing and understanding speech in a normal conversation?

                                YES 1
                                NO 2
                                REFUSED 7
                                DON'T KNOW 9

SPQ110   Prior to kindergarten, did {CHILD} ever receive therapy services or take part in a program for children with disabilities?

        CHILDREN WITH DISABILITIES INCLUDE THOSE WITH DEVELOPMENTAL DELAYS, COMMUNICATION IMPAIRMENTS, OR SPECIAL HEALTH CARE NEEDS.

                                  YES 1 (SPQ.120A)
                                NO .... 2 (BOX 5)
                                REFUSED .... 7 (BOX 5)
                                DON'T KNOW .... 9 (BOX 5)

SPQ120A   **HELP AVAILABLE**
        I'm going to read a list of services. For each service, please tell me if {CHILD} or your family ever received this service prior to kindergarten to help with {CHILD}'s special needs.

        Speech or language therapy?

        HELP TEXT:
        Speech or language therapy: Therapy involving the evaluation or treatment of the student's speech or language abilities. Impairments to speech can include one or more of the following: articulation errors (includes omitting words, substituting words, or distorting sounds), inappropriate   voice (including pitch, loudness, or voice quality), or abnormal fluency (including, abnormal rate of speaking, speech interruptions, repetitions of sounds, words, phrases or sentences). Impairments to language can include improper use of phonemes, syntax, or semantics. Language impairments can also stem from improper practical use of language. Therapy includes special techniques to overcome speech or language limitations.   Therapy should be provided only by a teacher of the speech or language impaired who is certified by the state, or by a certified Speech and Language Therapist/Pathologist.

                                  YES 1
                                  NO 2
                                  REFUSED 7
                                  DON'T KNOW 9

SPQ120B   **HELP AVAILABLE**

[For each service, please tell me if {CHILD} or your family ever received this service prior to kindergarten to help with {CHILD}'s special needs.]

Occupational therapy?

HELP TEXT
Occupational therapy: Therapy involving the evaluation or treatment of the student's level of independence in daily living activities. The goal of occupational therapy is to promote maximum independence in daily living. Therapy can include the use of work, play, or self-care activities to improve functional ability, promote health, prevent injury or further disability. Therapy should be provided only by a therapist who has been certified by the American Occupational Therapy Association or by an occupational therapy assistant who provides therapy under the supervision of a certified occupational therapist.

                    YES   1
                    NO   2
                    REFUSED   7
                    DON'T KNOW   9

SPQ120C   **HELP AVAILABLE**

[For each service, please tell me if {CHILD} or your family ever received this service prior to kindergarten to help with {CHILD}'s special needs.]

Physical therapy?

HELP TEXT:
Physical therapy: Therapy involving the evaluation or treatment of health problems resulting from injury or disease. It is also sometimes called physiotherapy. Physical therapists assess joint motion, muscle strength and endurance, how well the heart and lungs work, and how well children can do activities required for daily living. Treatment includes therapeutic exercise, cardiovascular endurance training, and training in activities of daily living, as well as the use of massage, light, cold, heat, electricity, and mechanical devices to treat physical disorders.   Physical therapy does not include the use of X-Ray technology. Therapy should be provided only by a therapist who has been state-certified to provide such services.

                    YES   1
                    NO   2
                    REFUSED   7
                    DON'T KNOW   9

SPQ120D

[For each service, please tell me if {CHILD} or your family ever received this service prior to kindergarten to help with {CHILD}'s special needs.]

Vision services?

HELP AVAILABLE
Vision services: Therapy combines health and education professions to improve the student's independence in daily living and access to educational materials. Health professionals include ophthalmologists and optometrists. Ophthalmologists are medical doctors who specialize in medical and surgical care of the eyes and visual system. Optometrists are health service providers who evaluate vision conditions such as nearsightedness, farsightedness, astigmatism, and presbyopia. They test the student's ability to focus and coordinate the eyes, judge depth, and see colors accurately. They prescribe eyeglasses, contact lenses, low vision aids, and vision therapy. Teachers of the visually impaired are state-certified to teach students who are visually impaired or blind.

```
YES .............................................................   1
NO ...............................................................   2
REFUSED ...................................................   7
DON'T KNOW ............................................   9
```

SPQ120E

[For each service, please tell me if {CHILD} or your family ever received this service prior to kindergarten to help with {CHILD}'s special needs.]

Social work services?

HELP TEXT:
Social work services: Services that provide support to students and their families to meet individual human needs. Particular attention is devoted to the needs and empowerment of students and their families who are disadvantaged, vulnerable, or at risk. Social workers strive to focus on the well being of the student and his/her family in the context of their school and community. Social workers attend to the environmental forces that create, contribute to, and address problems of daily living. Services should be provided only by a social worker who has been certified by the state to provide such services.

```
YES .............................................................   1
NO ...............................................................   2
REFUSED ...................................................   7
DON'T KNOW ............................................   9
```

SPQ120F

[For each service, please tell me if {CHILD} or your family ever received this service prior to kindergarten to help with {CHILD}'s special needs.]

Psychological services?

HELP TEXT:
Psychological services: Services that involve the assessment of academic skills and learning aptitudes, personality and emotional development, social skills and school climates, and eligibility for special education. Treatment involves one-on-one interaction with students or parents to resolve personal conflicts and problems in learning and adjustment, psychological counseling for students and parents, social skills training, and assistance through separation and loss. Within school systems, psychological services are typically provided by certified school psychologists. However, assessment

and treatment can be extended to the health community and include services provided by clinical psychologists, psychiatric social workers, or psychiatrists (who are medical doctors).

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

SPQ120G   **HELP AVAILABLE**

[For each service, please tell me if {CHILD} or your family ever received this service prior to kindergarten to help with {CHILD}'s special needs.]

Home visits?

HELP TEXT:
Home visits: Refer to formal visits to the homes of students by a certified health or education professional. Home visits can involve therapy or education services. Home visits are typically made by teachers of preschool or kindergarten age students with disabilities, occupational or physical therapists, school social workers, school psychologists, or regular classroom teachers.

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

SPQ120H   **HELP AVAILABLE**

[For each service, please tell me if {CHILD} or your family ever received this service prior to kindergarten to help with {CHILD}'s special needs.]

Parent support or training?

HELP TEXT:
Parent support or training: Refer to assistance provided by the schools to parents who have students with unique educational needs, such as the student with a disability. Parent support ranges from the provision of information or referral to assistance in accessing community services for their child. Parent training can involve learning to use special instructional techniques, assistive devices (such as low vision aids) or other equipment needed by their child, or general understanding of the unique educational needs of their child.

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

SPQ120I   **HELP AVAILABLE**

[For each service, please tell me if {CHILD} or your family ever received this service prior to kindergarten to help with {CHILD}'s special needs.]

Special class with other children some or all of whom also had special needs?

HELP TEXT:
Special class with other children some or all of whom also had special needs: Refers to a classroom with a smaller number of students than found in the regular classroom. Students in special classes have unique learning needs often resulting from a disability or limited English proficiency. All students in such classrooms require individual attention to their educational needs.

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

SPQ120J   **HELP AVAILABLE**

[For each service, please tell me if {CHILD} or your family ever received this service prior to kindergarten to help with {CHILD}'s special needs.]

Private tutoring or schooling for learning problems?

HELP TEXT:
Private tutoring or schooling for learning problems: Refer to education or training associated with a specific learning problem or need. The term "private" suggests either that there is a cost associated with the service or education is not sanctioned by the public school system. Individuals, organizations, or businesses in school, home, or community settings can provide private tutoring designed to improve the student's educational achievement, typically in math or reading. Special schools are available to students with particular needs such as emotional problems, learning disabilities, blindness, or deafness. Such schools charge parents for their child's education. However, the education of students with disabilities may be subsidized by their home school district if the district cannot provide a similar appropriate education.

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

+---+
| **BOX 4A** |
| |
| ■   IF CHILD DOES NOT HAVE DIFFICULTY SEEING (SPQ107=2, DK, REFUSED) |
| OR |
| CHILD'S VISION PROBLEM IS CORRECTABLE WITH GLASSES (SPQ108=1), |
| GO TO BOX 4B. |
| |
| ■   OTHERWISE, CONTINUE WITH SPQ120K. |
+---+

SPQ120K   **HELP AVAILABLE**

[For each service, please tell me if {CHILD} or your family ever received this service prior to kindergarten to help with {CHILD}'s special needs.]

Instruction in Braille?

HELP TEXT:

Instruction in Braille: Braille is a touch system of reading using as the basic graphic symbol a cell composed of six dots, two dots wide and three dots high. The dots are "read" by running the hand over the paper rather than looking at it. Sixty-three possible dot combinations of the cell form the basis of the Braille code, and numerous rules govern the usage of the code. Learners who are totally blind, near-blind, and with profound low vision need mastery of reading Braille since it is likely their only means of gaining access to educational information in print form. Reading in Braille is a system of reading that differs in many significant ways from reading in print. Teachers receive special training to teach Braille.

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

BOX 4B

IF CHILD DOES NOT HAVE DIFFICULTY HEARING (SPQ109=2, DK, OR REFUSED), GO TO SPQ130A.

OTHERWISE, GO TO SPQ120L.

SPQ120L   **HELP AVAILABLE**

[For each service, please tell me if {CHILD} or your family ever received this service prior to kindergarten to help with {CHILD}'s special needs.]

Instruction in sign language, Cued speech, ASL, TOCO?

HELP TEXT:

Instruction in sign language, Cued speech, ASL, TOCO: Refers to various manual methods that replace the use of speech only as a means of communication. Manual communication is a system of teaching individuals with hearing impairments that makes use of sign language and fingerspelling. Sign language is a general term for using the hands to form words and phrases. There are many forms of sign language, including American Sign Language (ASL), Signed English, Sign Exact English (SEE), etc. Cued Speech uses hand signals to symbolize sounds. TOCO refers to total communication. TOCO employs a combination of oral and manual approaches to communication and includes speech, sign language, lip-reading, natural gestures, fingerspelling, residual hearing, reading and writing.

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

SPQ130A   How old was {CHILD} when (this service/the earliest of these services) began?

               ENTER AGE.

               CAPI INSTRUCTION: DISPLAY 'THIS SERVICE' IF ONLY ONE ITEM CODED 1 (YES) FOR
               SPQ120A-L) OR IF SPQ110=1 AND EVERY ITEM AT SPQ120=2, DON'T KNOW, OR REFUSED.
               OTHERWISE, DISPLAY 'THE EARLIEST OF THESE SERVICES.'

               CAPI INSTRUCTION: RANGE CHECK: 0-24 IF MONTHS IS THE UNIT; 0-CURRENT AGE IF YEARS
               IS THE UNIT.

               CAPI INSTRUCTION: IF AGE=0, SKIP THE UNIT FIELD AND GO TO BOX 5.

                                        |___|___|
                                        ENTER AGE
                                            OR
                              REFUSED .... 7 (BOX 5)
                              DON'T KNOW .... 9 (BOX 5)

SPQ130B   [How old was {CHILD} when (this service/the earliest of these services) began?]

                              MONTHS 1
                              YEARS 2
                              REFUSED 7
                              DON'T KNOW 9

               ┌───┐
               │   **Box 5**   │
               │   │
               │ ■   IF (NumberOfChildren =1) OR   │
               │   IF (NumberOfChildren >1 and ChildNum=1), GO TO SPQ150.   │
               │   │
               │ ■   IF (NumberOfChildren >1 and ChildNum=2), GO TO BOX 6.   │
               └───┘

SPQ150   When {CHILD} was born, were (his/her) biological mother and biological father married?

                              YES 1
                              NO 2
                              REFUSED 7
                              DON'T KNOW 9

SPQ155   **HELP AVAILABLE**
               Is any language other than English regularly spoken in your home?

               HELP TEXT:
               Regularly: A language, other than English, that is spoken on a regular basis (that is, occurring at least
               weekly) by at least one household member.

                              YES 1 (SPQ.157)
                              NO 2 (SPQ.160)
                              REFUSED 7 (SPQ.160)
                              DON'T KNOW 9 (SPQ.160)

SPQ157   **HELP AVAILABLE**

What is the **primary** language spoken in your home?

HELP TEXT:
Primary language: The language spoken the most of the time by most of the household members.

CODE '15' IF RESPONDENT CAN'T CHOOSE A PRIMARY LANGUAGE.

CAPI INSTRUCTION: DISPLAY 'PRIMARY' IN BRIGHT WHITE.

                    ENGLISH 0
                    ARABIC 1
                    CHINESE 2
                    FILIPINO LANGUAGE 3
                    FRENCH 4
                    GERMAN 5
                    GREEK... 6
                    ITALIAN 7
                    JAPANESE 8
                    KOREAN 9
                    POLISH 10
                    PORTUGUESE 11
                    SPANISH 12
                    VIETNAMESE 13
                    SOME OTHER LANGUAGE 14
                    (SPECIFY)_____
                    RESPONDENT CANNOT CHOOSE A
                    PRIMARY LANGUAGE 15
                    REFUSED 77
                    DON'T KNOW 99

+---+
| **BOX 5A** |
| |
| ■   IF CODED "14" AT SPQ.157, CONTINUE WITH SPQ 157OS. |
| |
| ■   OTHERWISE, GO TO SPQ.160 |
+---+

SPQ157OS   [What is the **primary** language spoken in your home?]

                SPECIFY LANGUAGE.

                CAPI INSTRUCTION: DISPLAY "PRIMARY" IN BRIGHT WHITE.

SPQ160   **HELP AVAILABLE**

Now I have a few questions about education and job training. What is the highest grade or year of school that you have completed?

HELP TEXT:
Highest Grade or Year of School Completed: For grades 1-11, enter the exact grade level. If the person you are asking about completed elementary school, find out the last grade completed. If the respondent says the person finished 12th grade, ask whether the person received a diploma or got the equivalent of a high school diploma.

Completing a given grade in school should be counted as the number of years it normally takes to complete that grade level of education, regardless of how many years it actually took the person to finish. This means that for persons who skipped or repeated grades in elementary school, you will

enter the highest grade completed regardless of the number of years they were in school. This rule is true for elementary school through high school and is especially relevant to college.

12th grade but no diploma: The person completed the 12th grade, but did not earn a high school diploma or GED.

High school diploma/equivalent: A certificate that verifies that a person has successfully completed the required courses of a high school curriculum. Includes both actually graduating from high school or having a GED. The GED is an exam certified equivalent of a high school diploma received when the person has not actually received a degree from attending high school, but has acquired his/her GED (high school equivalency based on passing the GED exam).

Vocational/technical program after high school but no voc/tech diploma: The person attended this type of program, but did not earn a degree/diploma/certificate of successful completion of the program. Vocational/trade school after high school refers to work or trade-related education received after completing high school, but does not include college. Examples include secretarial school, mechanical or computer training school, etc. Some community colleges offer vocational training, but this would be considered "1-2 years of college" or "associate's degree" and not vocational or trade school.

Vocational/technical program after high school: The person attended this type of program, but DID earn a degree/diploma/certificate of successful completion of the program. Vocational/trade school after high school refers to work or trade-related education received after completing high school, but does not include college. Examples include secretarial school, mechanical or computer training school, etc. Some community colleges offer vocational training, but this would be considered "1-2 years of college" or "associate's degree" and not vocational or trade school.

Some college but no degree: The person does not have a 4-year college (bachelor's) degree but has completed a class for credit at a college, university, or vocational/technical school.

Associate's degree: A 2-year college degree typically earned at a community college (rather than a trade school).

Bachelor's degree: A 4-year college degree earned at a university or 4-year college. It is sometimes called an "undergraduate degree."

Graduate or professional school but no degree: The person attended a graduate or professional school that advanced him/her toward a degree beyond a Bachelor's degree (for example, a Master's, Doctorate, or other professional degree). However, the person did not complete the program or earn the degree.

Master's (MA, MS): Studies beyond a bachelor's degree, but not a Ph.D. or EDD.

Doctorate Degree (Ph.D., EDD): Studies beyond a Master's degree that result in a doctorate degree.

Professional degree after bachelor's degree (Medicine/MD; Dentistry/DDS, Law/JD/LLB): Any other graduate degrees earned with academic studies beyond the bachelor's.

NEVER BEEN IN SCHOOL	0
1ST GRADE	1
2ND GRADE	2
3RD GRADE	3
4TH GRADE	4
5TH GRADE	5
6TH GRADE	6
7TH GRADE	7
8TH GRADE	8
9TH GRADE	9
10TH GRADE	10

```
11TH GRADE  ............................................  11
12TH GRADE BUT NO DIPLOMA ..............  12
HIGH SCHOOL DIPLOMA/EQUIVALENT ....  13  (SPQ.180)
VOC/TECH PROGRAM AFTER HIGH
SCHOOL BUT NO VOC/TECH ...................  14
VOC/TECH PROGRAM AFTER HIGH
SCHOOL  ....................................................  15
SOME COLLEGE BUT NO DEGREE .........  16  (SPQ,180)
ASSOCIATE'S DEGREE ............................  17  (SPQ,180)
BACHELOR'S DEGREE  ............................  18  (SPQ,180)
GRADUATE OR PROFESSIONAL
SCHOOL BUT NO DEGREE........................  19  (SPQ,180)
MASTER'S DEGREE (MA, MS) ...................  20  (SPQ,180)
DOCTORATE DEGREE (PHD, EDD) ..........  21  (SPQ,180)
PROFESSIONAL DEGREE AFTER
BACHELOR'S DEGREE .............................  22  (SPQ,180)
REFUSED  ..................................................  77
DON'T KNOW  ...........................................  99
```

SPQ170   **HELP AVAILABLE**

Do your have a high school diploma or its equivalent, such as a GED?

HELP TEXT:
High school diploma/equivalent: A certificate that verifies that a person has successfully completed the required courses of a high school curriculum. Includes both actually graduating from high school or having a GED. The GED is an exam certified equivalent of a high school diploma received when the person has not actually received a degree from attending high school, but has acquired his/her GED (high school equivalency based on passing the GED exam).

```
YES  ...........................................................  1
NO  .............................................................  2
REFUSED  ..................................................  7
DON'T KNOW  ...........................................  9
```

SPQ180   **HELP AVAILABLE**

What is the highest grade or year of school that your partner has completed?

IF NO PARTNER, CODE "23".

HELP TEXT:
Highest Grade or Year of School Completed: For grades 1-11, enter the exact grade level. If the person you are asking about completed elementary school, find out the last grade completed. If the respondent says the person finished 12th grade, ask whether the person received a diploma or got the equivalent of a high school diploma.

Completing a given grade in school should be counted as the number of years it normally takes to complete that grade level of education, regardless of how many years it actually took the person to finish. This means that for persons who skipped or repeated grades in elementary school, you will enter the highest grade completed regardless of the number of years they were in school. This rule is true for elementary school through high school and is especially relevant to college.

12th grade but no diploma: The person completed the 12th grade, but did not earn a high school diploma or GED.

High school diploma/equivalent: A certificate that verifies that a person has successfully completed the required courses of a high school curriculum. Includes both actually graduating from high school or having a GED. The GED is an exam certified equivalent of a high school diploma received when the person has not actually received a degree from attending high school, but has acquired his/her GED (high school equivalency based on passing the GED exam).

Vocational/technical program after high school but no voc/tech diploma: The person attended this type of program, but did not earn a degree/diploma/certificate of successful completion of the program. Vocational/trade school after high school refers to work or trade-related education received after completing high school, but does not include college. Examples include secretarial school, mechanical or computer training school, etc. Some community colleges offer vocational training, but this would be considered "1-2 years of college" or "associate's degree" and not vocational or trade school.

Vocational/technical program after high school: The person attended this type of program, but DID earn a degree/diploma/certificate of successful completion of the program. Vocational/trade school after high school refers to work or trade-related education received after completing high school, but does not include college. Examples include secretarial school, mechanical or computer training school, etc. Some community colleges offer vocational training, but this would be considered "1-2 years of college" or "associate's degree" and not vocational or trade school.

Some college but no degree: The person does not have a 4-year college (bachelor's) degree but has completed a class for credit at a college, university, or vocational/technical school.

Associate's degree: A 2-year college degree typically earned at a community college (rather than a trade school).

Bachelor's degree: A 4-year college degree earned at a university or 4-year college. It is sometimes called an "undergraduate degree."

Graduate or professional school but no degree: The person attended a graduate or professional school that advanced him/her toward a degree beyond a Bachelor's degree (for example, a Master's, Doctorate, or other professional degree). However, the person did not complete the program or earn the degree.

Master's (MA, MS): Studies beyond a bachelor's degree, but not a Ph.D. or EDD.

Doctorate Degree (Ph.D., EDD): Studies beyond a Master's degree that result in a doctorate degree.

Professional degree after bachelor's degree (Medicine/MD; Dentistry/DDS, Law/JD/LLB): Any other graduate degrees earned with academic studies beyond the bachelor's.

```
NEVER BEEN IN SCHOOL.........................  0
1ST GRADE  ...............................................  1
2ND GRADE...............................................  2
3RD GRADE  ..............................................  3
4TH GRADE  ..............................................  4
5TH GRADE  ..............................................  5
6TH GRADE  ..............................................  6
7TH GRADE  ..............................................  7
8TH GRADE  ..............................................  8
9TH GRADE  ..............................................  9
10TH GRADE  ...........................................  10
11TH GRADE  ...........................................  11
12TH GRADE BUT NO DIPLOMA ..............  12
HIGH SCHOOL DIPLOMA/EQUIVALENT ....  13  (SPQ.200)
VOC/TECH PROGRAM AFTER HIGH
SCHOOL BUT NO VOC/TECH ...................  14
```

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VOC/TECH PROGRAM AFTER HIGH
SCHOOL .................................................... 15
SOME COLLEGE BUT NO DEGREE .......... 16  (SPQ.200)
ASSOCIATE'S DEGREE ............................ 17  (SPQ.200)
BACHELOR'S DEGREE ............................. 18  (SPQ.200)
GRADUATE OR PROFESSIONAL
SCHOOL BUT NO DEGREE........................ 19  (SPQ.200)
MASTER'S DEGREE (MA, MS) ................... 20  (SPQ.200)
DOCTORATE DEGREE (PHD, EDD) .......... 21  (SPQ.200)
PROFESSIONAL DEGREE AFTER
BACHELOR'S DEGREE ............................. 22  (SPQ.200)
NO SPOUSE OR PARTNER IN
HOUSEHOLD.............................................. 23  (SPQ.200)
REFUSED ................................................. 77
DON'T KNOW ........................................... 99
```

SPQ190   **HELP AVAILABLE**

Does your partner have a high school diploma or its equivalent, such as a GED?

HELP TEXT:
High school diploma/equivalent: A certificate that verifies that a person has successfully completed the required courses of a high school curriculum. Includes both actually graduating from high school or having a GED. The GED is an exam certified equivalent of a high school diploma received when the person has not actually received a degree from attending high school, but has acquired his/her GED (high school equivalency based on passing the GED exam).

```
YES ............................................................  1
NO ..............................................................  2
REFUSED ..................................................  7
DON'T KNOW ...........................................  9
```

SPQ200   **HELP AVAILABLE**

Between {CHILD}'s birth and when (he/she) entered kindergarten, did {CHILD}'s mother work outside the home for pay?

HELP TEXT:
Work for Pay: Paid work for wages, salary, commission, or pay "in kind." Examples of "pay in kind" include meals, living quarters, or supplies provided in place of wages. This definition of employment includes work in the person's own business, professional practice, or farm, paid leaves of absence (including vacations and illnesses), and work without pay in a family business or farm run by a relative. This definition excludes unpaid volunteer work (such as for a church or charity), unpaid leaves of absence, temporary layoffs (such as a strike), and work around the house.

```
YES ............................................................  1
NO ..............................................................  2
NO MOTHER IN HOUSEHOLD ...................  3
REFUSED ..................................................  7
DON'T KNOW ...........................................  9
```

SPQ210   **HELP AVAILABLE**

When {CHILD}'s mother was pregnant with {CHILD}, did she receive any WIC benefits?

HELP TEXT:
WIC: This program provides food assistance and nutritional screening to low-income pregnancy and postpartum women and their infants, as well as to low-income children up to age 5. WIC is short for the Special Supplemental Food Program for Women, Infants, and Children. WIC benefits can include food, checks, and/or vouchers.

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

SPQ220   **HELP AVAILABLE**

Did {CHILD} receive any WIC benefits as an infant or child?

HELP TEXT:
WIC: This program provides food assistance and nutritional screening to low-income pregnancy and postpartum women and their infants, as well as to low-income children up to age 5. WIC is short for the Special Supplemental Food Program for Women, Infants, and Children. WIC benefits can include food, checks, and/or vouchers.

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

BOX 6

GO TO PIQ (PARENT'S INVOLVEMENT WITH CHILD'S SCHOOL).

PARENT'S INVOLVEMENT WITH THE CHILD'S SCHOOL (*FALL FIRST GRADE*) - PIQ

BOX 1

- IF (NumberOfChildren = 2 AND ChildNum = 2), GO TO PIQ.005.
- OTHERWISE, GO TO BOX 2.

PIQ.005   Now I'd like to ask you about {CHILD}'s school. Do {CHILD} and {TWIN} have the same teacher?

YES.. 1
NO 2
REFUSED 7
DON'T KNOW 9

BOX 2

- IF NumberOfChildren = 2 AND ChildNum = 2 AND PIQ.005 = 1, GO TO PIQ.030.
- OTHERWISE, CONTINUE WITH PIQ.020.

PIQ.020   {Now, I'd like to ask you about {CHILD}'s school.} Did you **ever** receive information about any of the following from {CHILD}'s school?

CAPI INSTRUCTION: DISPLAY "ever" IN BRIGHT WHITE.

CAPI INSTRUCTION: DISPLAY 'Now, I'd … school' IF MORE THAN 1 SAMPLED CHILD AND CURRENTLY ASKING ABOUT CHILD 2 OR IF ONLY 1 SAMPLED CHILD. OTHERWISE, USE A NULL DISPLAY.

		YES	NO	REFUSED	DON'T KNOW
a.	How to prepare {CHILD} for first grade?...........................	1	2	7	9
b.	Summer book lists or reading assignments?	1	2	7	9
c.	Other suggested summer activities?	1	2	7	9
d.	Information about orientation meetings or back-to-school nights for parents of incoming first graders?	1	2	7	9

BOX 2a

- IF PIQ.020d = 1, GO TO PIQ.026.
- ELSE, IF PIQ.020d ½ 1, GO TO PIQ.030.

PIQ.026   Did you or another family member attend the orientation meeting or back-to-school night?

YES.. 1
NO 2
REFUSED 7
DON'T KNOW 9

PIQ.030　　　　{Now, I'd like to ask you about {CHILD}'s school.} What is your best guess about how well {CHILD} will do in learning to use letters and reading this year? Do you think it will be…

CAPI INSTRUCTION: DISPLAY "Now, I'd like to ask you about {CHILD}'s school." IF MORE THAN ONE SAMPLED CHILD AND CURRENTLY ASKING ABOUT CHILD 2 AND PIQ.005 = 1 FOR CHILD 1. OTHERWISE, USE A NULL DISPLAY.

Excellent, ...	1
Good,..	2
Satisfactory, or	3
Unsatisfactory?	4
REFUSED	7
DON'T KNOW	9

PIQ.035　　　　What is your best guess about how well {CHILD} will do in learning about numbers, logic, and math this year? Do you think it will be…

Excellent, ...	1
Good,..	2
Satisfactory, or	3
Unsatisfactory?	4
REFUSED	7
DON'T KNOW	9

HELP AVAILABLE

PIQ.040　　　　How far in school do you expect {CHILD} to go? Please tell us how far you **expect** {him/her} to go in school rather than how far you would like for {him/her} to go. Would you say you expect {him/her} …

CAPI INSTRUCTION: DISPLAY "expect" IN BRIGHT WHITE.

HELP SCREEN
How far the respondent expects the child to go in school:
This question is about how far in school the respondent realistically expects the child to go in school, not how far the respondent hopes the child will go. If it is difficult to answer the question because the answer depends on many factors, ask for the best guess.

To receive less than a high school diploma, ...	1
To graduate from high school, ...	2
To attend two or more years of college, ...	3
To finish a four- or five-year college degree, ...	4
To earn a master's degree or equivalent, or	5
To finish a Ph.D., MD, or other advanced degree?	6
REFUSED	7
DON'T KNOW	9

BOX 3

■　　GO TO SECTION FSQ (FAMILY STRUCTURE).

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┌─────────────────────────────────────────────────────────────────────────┐
│                                 BOX 1                                     │
│                                                                           │
│  ■      IF COOPERATING RESPONDENT:                                        │
│  IF (Number Of Children = 1) OR                                           │
│  IF (Number Of Children > 1 and ChildNum =1).  CONTINUE WITH FSQ.010.     │
│  ■      IF PREVIOUS ROUND NON-RESPONDENT:                                 │
│  If (Number Of Children = 1) OR                                           │
│  IF (Number Of Children >1 AND ChildNum=1), GO TO FSQ.020.                │
│  ■      IF (NumberOfChildren >1 and ChildNum=2), GO TO BOX 5.             │
│  ■      Else, go to FSQ.010.                                              │
└─────────────────────────────────────────────────────────────────────────┘
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FSQ.010   Now I have a few questions about your household. We have listed that (READ NAMES FROM MATRIX) lived in this household at the time of our last interview.

As I read each person's name again, please tell me if he or she still lives in this household.

Does {NAME} still live in this household?

CAPI MATRIX INSTRUCTIONS:

1.   DISPLAY 'STILL' IN BRIGHT WHITE.

2.   DISPLAY THE COMPLETED HOUSEHOLD MATRIX FROM THE PREVIOUS ROUND INTERVIEW. THIS INCLUDES THE PERSON TYPE, FIRST NAME, LAST NAME, AGE, AND GENDER COLUMNS. THESE COLUMNS SHOULD BE PROTECTED, THAT IS, INFORMATION CANNOT BE CHANGED.

    DISPLAY ONLY THOSE HOUSEHOLD MEMBERS WHO, AS INDICATED IN THE PREVIOUS ROUND INTERVIEW, ARE STILL IN THE HOUSEHOLD (IF THERE IS A "1" IN THE SIXTH COLUMN OF THE PREVIOUS ROUND MATRIX.)

3.   ADD AS THE 6TH COLUMN TO THE MATRIX, 'STILL IN HH'. DISPLAY '1' IF PERSON STILL LIVES IN THE HOUSEHOLD AND '2' IF THE PERSON DOES NOT (BASED ON HOW FSQ.010 IS CODED).

4.   THE CURSOR SHOULD START AT THE 'STILL IN HH' COLUMN FOR THE FIRST PERSON LISTED IN THE MATRIX.

5.   DISPLAY BRACKETS [ ] AROUND THE FIRST TWO PARAGRAPHS WHENEVER IN THE 'STILL IN HH' COLUMN FOR SOMEONE OTHER THAN THE FIRST PERSON LISTED ON THE MATRIX. (THE FIRST TWO PARAGRAPHS SHOULD BE DISPLAYED WITHOUT THE BRACKETS WHEN YOU FIRST ARRIVE AT THIS QUESTION.)

6.   ADD AS THE 7TH COLUMN TO THE MATRIX, 'WHY MOVE OUT' (FSQ.015).

7.   IF THE 'STILL IN HH' COLUMN IS CODED 'NO', THE CURSOR SHOULD MOVE RIGHT TO THE 'WHY MOVE OUT' COLUMN. IF THE 'STILL IN HH' IS CODED 'YES', THE CURSOR SHOULD MOVE TO THE 'STILL IN HH' COLUMN FOR THE NEXT PERSON ON THE MATRIX (THE 'WHY MOVE OUT' COLUMN DOES NOT NEED TO BE COMPLETED IN THIS INSTANCE).

8.   IF INQ.010 = 1 (SAME RESPONDENT AS PREVIOUS ROUND) AND FSQ.010 = 2 (NOT IN HH), DISPLAY ERROR MESSAGE: 'THIS PERSON CANNOT BE THE RESPONDENT AND BE NOT IN THE HOUSEHOLD.'

9.   ADD AS THE 8TH COLUMN TO THE MATRIX, 'WHY MOVE OTHER' (FSQ.015OS).

10.   ONCE THE MATRIX IS COMPLETE (AS APPLICABLE) MOVE TO THE NEXT ITEM FSQ.017.

YES .... 1 (Ask about next HH
                                                        member)
NO 2 (FSQ.015)

FSQ.015   Why is {NAME} no longer living in this household?

CAPI MATRIX INSTRUCTIONS:

1.   DISPLAY THIS QUESTION WHENEVER IN THE 'WHY MOVE OUT' COLUMN.

2.   ONCE THIS ITEM IS CODED, THE CURSOR SHOULD MOVE TO THE 'STILL IN HH' COLUMN
       FOR THE NEXT PERSON ON THE MATRIX.

3.   HOWEVER, IF SOME OTHER REASON IS CODED, THEN FSQ.015OS MUST FIRST BE
       COMPLETED BEFORE MOVING TO THE NEXT PERSON ON THE MATRIX.

SEPARATION OR DIVORCE 1
ATTENDING COLLEGE OR
    BOARDING SCHOOL 2
LIVING ELSEWHERE FOR
    EMPLOYMENT-RELATED REASONS 3
DECEASED 4
SOME OTHER REASON 5 (FSQ.0150S)
DON'T KNOW 7
REFUSED 9

FSQ.015OS   [Why is {NAME} no longer living in this household?]

ENTER OTHER REASON.

CAPI MATRIX INSTRUCTIONS.

1.   DISPLAY 'WHY MOVE OTHER' AS THE 8TH COLUMN IN THE MATRIX.

2.   DISPLAY THIS QUESTION WHENEVER IN THE 'WHY MOVE OTHER' COLUMN.

3.   THIS COLUMN ONLY NEEDS TO BE COMPLETED IF CODE 5 IS SELECTED AS A REASON
       IN THE 'WHY MOVE OUT' COLUMN.

_____
                       OTHER REASON

FSQ.017   Other than the people I just asked about, is there anyone **else** currently living in this household?

For example, anyone who has moved in or any babies born since our last interview and who also still
lives here? Please do not include anyone staying here temporarily who usually lives somewhere else.

CAPI INSTRUCTION: DISPLAY 'else' IN BRIGHT WHITE.

YES	1	(FSQ.020)
NO	2	(BOX 1A)
DON'T KNOW	7	(BOX 1A)
REFUSED	9	(BOX 1A)

FSQ.020   {Now I have a few questions about your household. We have noted that you and {CHILD} {and {TWIN}} currently live in this household.} {Please tell me the names and ages of all the other people who normally live here. Please do not include anyone staying here temporarily who usually lives somewhere else.}

{PROBE: Anyone else (living in this household)?}

PRESS THE DOWN ARROW KEY TO ADD A HOUSEHOLD MEMBER.}

{ENTER FIRST NAME OF {NEW} HOUSEHOLD MEMBER OR PRESS ENTER ON A BLANK FIELD IF MATRIX IS COMPLETE.}

CAPI MATRIX INSTRUCTIONS:

1.   DISPLAY THE HOUSEHOLD MATRIX (PERSON TYPE, FIRST NAME, LAST NAME, AGE, AND GENDER COLUMNS.)

2.   THE INTERVIEWER CAN ADD UP TO 25 ROW ENTRIES.

3.   THE INTERVIEWER CAN MOVE ALL AROUND THE MATRIX USING THE ARROW KEYS (EXCEPT ON PROTECTED FIELDS).

4.   IF COOPERATING RESPONDENT:

   a.   DISPLAY ALL HOUSEHOLD MEMBERS AND ASSOCIATED INFORMATION AS COLLECTED IN THE SPRING OR UPDATED IN INQ (FOR THE CHILD AND PREVIOUS ROUND RESPONDENT). HOWEVER, DO NOT DISPLAY THE NAMES OF THOSE HH MEMBERS THAT WERE CODED '2' AT FSQ.010 (NOT IN HH ANYMORE). LEAVE THAT PERSON'S ROW BLANK.

   b.   ALL PREVIOUS HH MEMBER ROWS SHOULD BE PROTECTED. THE CURSOR SHOULD APPEAR ON THE FIRST BLANK FIRST NAME COLUMN.

   c.   WHEN ON THE FIRST BLANK FIRST NAME COLUMN DISPLAY "PLEASE TELL…SOMEWHERE ELSE.", "PROBE: … HOUSEHOLD", "ENTER FIRST …COMPLETE", AND THE "NEW" IN THAT SCREEN INSTRUCTION.

   d.   WHEN ON THE SECOND BLANK FIRST NAME COLUMN, DISPLAY THE "PLEASE TELL…SOMEWHERE ELSE." IN BRACKETS [ ]. THE PROBE AND SCREEN INSTRUCTION CITED ABOVE SHOULD ALSO CONTINUE TO BE DISPLAYED.

5.   IF PREVIOUS ROUND NON-RESPONDENT:

   a.   DISPLAY THE RESPONDENTS FIRST AND LAST NAMES IN THE APPROPRIATE COLUMNS (COLLECTED AT INQ060/070). DISPLAY 'R' IN THE FIRST COLUMN TO INDICATE THAT PERSON IS THE RESPONDENT.

b. DISPLAY THE NAME OF THE FOCAL CHILD IN THE SECOND ROW OF THE FIRST AND LAST. NAME COLUMNS. DISPLAY 'C' IN THE FIRST COLUMN TO INDICATE THAT PERSON IS THE FOCAL CHILD. DISPLAY THE AGE AND GENDER OF THE CHILD IN THE APPROPRIATE COLUMNS OF THE SECOND ROW. THIS ROW IS PROTECTED.

c. IF APPLICABLE DISPLAY THE NAME OF THE FOCAL CHILD'S TWIN IN THE THIRD ROW OF THE FIRST AND LAST NAME COLUMNS. DISPLAY 'T' IN THE FIRST COLUMN TO INDICATE THAT PERSON IS THE FOCAL CHILD'S TWIN. DISPLAY THE AGE AND GENDER OF THE TWIN IN THE APPROPRIATE COLUMNS OF THE THIRD ROW. THIS ROW IS PROTECTED.

d. DISPLAY THE FIRST PARAGRAPH "NOW…SOMEWHERE ELSE." WHEN YOU FIRST ARRIVE AT FSQ.020. ALSO DISPLAY THIS PARAGRAPH IN BRACKETS [ ] WHENEVER YOU ARE IN THE FIRST NAME COLUMN FOR ANY PERSON OTHER THAN PERSON NUMBER 1 (THE RESPONDENT).

e. DISPLAY "YOU WILL NEED…THE MATRIX." AND "PRESS ENTER TO A HOUSEHOLD MEMBER" WHENEVER THE CURSOR IS POSITIONED IN THE FIRST NAME COLUMN FOR PERSON NUMBER 1.

f. DISPLAY "ENTER FIRST NAME…IF MATRIX IS COMPLETE." WHENEVER THE CURSOR IS POSITIONED IN THE FIRST NAME COLUMN FOR A ROW OTHER THAN PERSON NUMBER 1 (THE FIRST BLANK ROW AFTER CHILD/TWIN).

g. DISPLAY "PROBE… HOUSEHOLD?" WHENEVER THE CURSOR IS POSITIONED IN THE FIRST NAME COLUMN FOR SOME OTHER THAN PERSON NUMBER 1 OR THE FIRST HOUSEHOLD MEMBER ADDED AFTER THE CHILD/TWIN.

6. DISPLAY THE NAME OF THE FOCAL CHILD IN THE SECOND ROW OF THE FIRST NAME COLUMN.

DISPLAY "C" IN THE FIRST COLUMN TO INDICATE THAT PERSON IS THE FOCAL CHILD. DISPLAY THE AGE AND GENDER OF THE CHILD IN THE APPROPRIATE COLUMNS OF THE SECOND ROW.

IF APPLICABLE, DISPLAY THE NAME OF THE FOCAL CHILD'S TWIN IN THE THIRD ROW OF THE FIRST NAME COLUMN.

DISPLAY "T" IN THE FIRST COLUMN TO INDICATE THAT THE PERSON IS THE FOCAL CHILD'S TWIN.

DISPLAY THE AGE AND GENDER OF THE TWIN IN THE APPROPRIATE COLUMNS OF THE THIRD ROW.

7. IF INQ.010 = 1, THEN DISPLAY THE "R" NEXT TO THE NAME OF THE PREVIOUS ROUND'S RESPONDENT. DISPLAY THE NAME OF RESPONDENT OF THE PREVIOUS ROUND ON THE FIRST ROW.

FSQ.025 ENTER LAST NAME OF {NAME}.

CAPI INSTRUCTION: DISPLAY THIS QUESTION WHEN THE CURSOR IS POSITIONED IN THE LAST NAME COLUMN OF THE HOUSEHOLD MATRIX.

FSQ.030   How old {are you/is {NAME}}?

ENTER AGE OF {NAME}.

CAPI INSTRUCTION: ACCEPT DON'T KNOW OR REFUSED.

CAPI INSTRUCTION: DISPLAY THIS QUESTION WHEN THE CURSOR IS POSITIONED IN THE AGE COLUMN OF THE HOUSEHOLD MATRIX.

CAPI INSTRUCTION: DISPLAY "ARE YOU" WHEN THE CURSOR IS POSITIONED IN THE AGE COLUMN FOR THE RESPONDENT'S ROW AND "IS {NAME}" (DISPLAY THE APPROPRIATE FIRST NAME) WHEN THE CURSOR IS POSITIONED IN THE AGE COLUMN FOR SOMEONE OTHER THAN THE RESPONDENT'S ROW.

FSQ.040   CODE IF OBVIOUS. OTHERWISE, ASK: {Are you/Is {NAME}} male or female?

ENTER GENDER OF {NAME}.

DISPLAY THIS QUESTION WHEN THE CURSOR IS POSITIONED IN THE GENDER COLUMN.

DISPLAY "ARE YOU" WHEN THE CURSOR IS POSITIONED IN THE GENDER COLUMN FOR THE RESPONDENT'S ROW AND "IS {NAME}" (DISPLAY THE APPROPRIATE FIRST NAME) WHEN THE CURSOR IS POSITIONED IN THE GENDER COLUMN FOR SOMEONE OTHER THAN THE RESPONDENT'S ROW.

MALE	1
FEMALE	2
DON'T KNOW	7
REFUSED	9

FSQ.045   IF HOUSEHOLD MATRIX IS COMPLETE, PRESS 1 AND ENTER TO CONTINUE.

CAPI INSTRUCTION: CHECK HOUSEHOLD MATRIX. IF ANY BLANK FIELDS, RETURN THE CURSOR TO THE BLANK FIELD ON THE MATRIX AND DISPLAY THE APPROPRIATE ERROR MESSAGE.

FSQ.060   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?

YES..	1	(FSQ.020)
NO	2	(FSQ.070)
DON'T KNOW	7	(FSQ.070)
REFUSED	9	(FSQ.070)

+--+
| **BOX 1A** |
| |
| BASE YEAR RESPONDENT: |
| ■   IF INQ.010 = 1, GO TO FSQ.110. |
| ■   OTHERWISE, CONTINUE WITH FSQ.070. |
| IF PREVIOUS ROUND NON-RESPONDENT. CONTINUE WITH FSQ.070. |
+--+

FSQ.070 CODE THE RESPONDENT.

ENTER THE NUMBER THAT IS NEXT TO THE NAME OF THE PERSON WHO IS THE RESPONDENT.

CAPI INSTRUCTION: FLAG THE PERSON SELECTED AS THE RESPONDENT FOR THE FALL 1ST GRADE ROUND. THE 'R' IN THE PERSON TYPE COLUMN OF THE HOUSEHOLD MATRIX SHOULD ONLY SHOW UP FOR THE PERSON SELECTED HERE.

CAPI INSTRUCTION: DISPLAY HOUSEHOLD MEMBERS 16 YEARS OR OLDER AS RESPONSE CATEGORY CHOICES. DO NOT DISPLAY THE NAMES OF HOUSEHOLD MEMBERS CODED AS NO LONGER LIVING IN THE HOUSEHOLD AT FSQ.010.

{DISPLAY HH MEMBER NAME 1} 1
{DISPLAY HH MEMBER NAME 2} 2
{DISPLAY HH MEMBER NAME 3} 3
{DISPLAY HH MEMBER NAME 4} 4
{DISPLAY HH MEMBER NAME 5} 5
{DISPLAY HH MEMBER NAME 6} 6
{DISPLAY HH MEMBER NAME 7} 7
{DISPLAY HH MEMBER NAME 8} 8

FSQ.110 Do you have a spouse or partner who lives in this household?

YES 1 (FSQ.120)
NO .... 2 (BOX 2)
DON'T KNOW .... 7 (BOX 2)
REFUSED .... 9 (BOX 2)

FSQ.120 Who in the household is your spouse or partner?

ENTER THE NUMBER NEXT TO THE NAME OF THE PERSON WHO IS {RESPONDENT}'S SPOUSE/PARTNER.

IF NAME NOT LISTED, BACK UP AND ADD PERSON (IF PART OF HOUSEHOLD).

CAPI INSTRUCTION: DISPLAY HOUSEHOLD MEMBERS 16 YEARS OR OLDER AS RESPONSE CATEGORY CHOICES. DO NOT DISPLAY THE NAMES OF HOUSEHOLD MEMBERS CODED AS NO LONGER LIVING IN THE HOUSEHOLD AT FSQ.010.

CAPI INSTRUCTION: DO NOT DISPLAY THE RESPONDENT'S NAME.

CAPI INSTRUCTION: FLAG PERSON SELECTED AT FSQ.120 AS "RESPONDENT'S SPOUSE/PARTNER".

CAPI INSTRUCTION: DISPLAY THE RESPONDENT'S FIRST NAME FOR {RESPONDENT}.

{DISPLAY HH MEMBER NAME 1} 1
{DISPLAY HH MEMBER NAME 2} 2
{DISPLAY HH MEMBER NAME 3} 3
{DISPLAY HH MEMBER NAME 4} 4
{DISPLAY HH MEMBER NAME 5} 5
{DISPLAY HH MEMBER NAME 6} 6
{DISPLAY HH MEMBER NAME 7} 7
{DISPLAY HH MEMBER NAME 8} 8

FSQ.130   **HELP AVAILABLE**

What is {your/{NAME}'s} relationship to {CHILD}?

{CODE RELATIONSHIP OF NEW HOUSEHOLD MEMBERS ONLY.}

HELP TEXT:

Mother/Female Guardian: The female primarily responsible for the child. Includes birth or biological mothers, adoptive, step, and foster mothers, as well as, legal female guardians.

Father/Male Guardian: The male primarily responsible for the child. Includes birth or biological fathers, adoptive, step, and foster fathers, as well as, legal male guardians.

Sister: Include biological (full, half), adoptive, step, and foster sisters.

Brother: Include biological (full, half), adoptive, step, and foster brothers.

Girlfriend or Partner of CHILD's Parent/Guardian: The female who has a "partner-like" relationship with one of the child's parents or guardians. "Living as married" is another way of describing the relationship.

Boyfriend or Partner of CHILD's Parent/Guardian: The male who has a "partner-like" relationship with one of the child's parents or guardians. "Living as married" is another way of describing the relationship.

Grandmother: The female parent of the child's biological or adoptive mother or father .

Grandfather: The male parent of the child's biological or adoptive mother or father.

Aunt: The sister of the child's biological or adoptive mother or father or the wife of the child's uncle.

Uncle: The brother of the child's biological or adoptive mother or father or the husband of the child's aunt.

Cousin: A child of the focal child's uncle, aunt, or cousin.

Other Relative: Refers to relationships that aren't specifically listed, such as great grandmother, niece, or nephew.

Other Non-relative: Refers to the relationship between two people when there is no family relationship through blood, marriage, adoption, or partnership (i.e., living together as married). It also refers to more ambiguous relationships that exist where there are two people living together as married and they have children. For example, the child's father and the father's girlfriend (who is not the child's mother) live together as married and the girlfriend's daughter lives with them. The relationship of the girlfriend's daughter to the child would be siblings if they were married, but since the father and the girlfriend are not married, she is an "other non-relative." If the "other non-relative" is coded, you will receive a list of other codes to use if they are more descriptive than "other non-relative."

CAPI INSTRUCTION: DISPLAY THE RELATIONSHIP MATRIX.

CAPI INSTRUCTION: DO NOT DISPLAY THE FOCAL CHILD'S ROW.

CAPI MATRIX INSTRUCTIONS:

1. IF COOPERATING RESPONDENT:

    a. DO NOT DISPLAY THE NAMES OF HH MEMBERS NOT LIVING IN THE HOUSEHOLD (CODED '2' AT FSQ.010).

    b. THE NAMES AND RELATIONSHIPS OF HOUSEHOLD MEMBERS COLLECTED LAST ROUND SHOULD BE PROTECTED.

    c. THE CURSOR SHOULD START IN THE FIELD FOR THE FIRST NEW PERSON ADDED AT FSQ.020 THIS ROUND.

    d. DISPLAY "CODE RELATIONSHIP…ONLY."

2. IF PREVIOUS ROUND NON-RESPONDENT:

    a. DISPLAY ALL NAMES COLLECTED AT FSQ.020.

    b. THE CURSOR SHOULD BEGIN IN THE COLUMN FOR THE RELATIONSHIP OF THE RESPONDENT TO THE CHILD.

MOTHER/FEMALE GUARDIAN 1 (FSQ.140)
FATHER/MALE GUARDIAN 2 (FSQ.150)
SISTER 3 (FSQ.160)
BROTHER 4 (FSQ.170)
GIRLFRIEND OR PARTNER OF {CHILD}'S
     PARENT/GUARDIAN.. 5 (BOX 4)
BOYFRIEND OR PARTNER OF {CHILD}'S
     PARENT/GUARDIAN.. 6 (BOX 4)
GRANDMOTHER .... 7 (BOX 4)
GRANDFATHER .... 8 (BOX 4)
AUNT .... 9 (BOX 4)
UNCLE .... 10 (BOX 4)
COUSIN .... 11 (BOX 4)
OTHER RELATIVE .... 12 (BOX 4)
OTHER NON-RELATIVE 13 (FSQ.180)

HELP AVAILABLE

{Are you/Is {NAME}} {CHILD}'s…

HELP TEXT:
Birth Mother: Child's female biological parent.

Adoptive Mother: The female who has taken the child into her own family by legal process to raise as her own child.

Step Mother: The female other than the child's mother who is married to the child's father.

Foster Mother: The female with whom the child is placed temporarily, usually through a social service agency and/or a court.

Female Guardian: The female legally placed in charge of the affairs of the child.

Birth mother, ...	1	(BOX 4)
Adoptive mother, ...	2	(BOX 4)
Step mother, or	3	(BOX 4)
Foster mother or female guardian?	4	(BOX 4)
DON'T KNOW	7	(BOX 4)
REFUSED	9	(BOX 4)

HELP AVAILABLE

{Are you/Is {NAME}} {CHILD}'s…

HELP TEXT:
Birth Father: Child's male biological parent.

Adoptive Father: The male who has taken the child into his own family by legal process to raise as his own child.

Step Father: The male other than the child's father who is married to the child's mother.

Foster Father: The male with whom the child is placed temporarily, usually through a social service agency and/or a court.

Male Guardian: The male legally placed in charge of the affairs of the child.

Birth father,..	1	(BOX 4)
Adoptive father, ...	2	(BOX 4)
Step father, or	3	(BOX 4)
Foster father or male guardian?	4	(BOX 4)
DON'T KNOW	7	(BOX 4)
REFUSED	9	(BOX 4)

{Are you/Is {NAME}} {CHILD}'s…

HELP TEXT:
Full Sister: A female with whom the child shares the same biological parents.

Half Sister: A female with whom the child shares one biological parent.

Step Sister: A female to whom the child is unrelated except by the marriage of one biological parent.

Adoptive Sister: A female to whom the child is unrelated except that they are in the same family in which she or the child has been legally adopted by the family.

Foster Sister: A female to whom the child is unrelated except that they are in the same family in which she or the child have been taken into the home on a temporary basis and the parents have legal responsibility for the child.

Full sister,..	1	(BOX 4)
Half sister, ...	2	(BOX 4)
Step sister, ...	3	(BOX 4)
Adoptive sister, or	4	(BOX 4)
Foster sister?	5	(BOX 4)
DON'T KNOW	7	(BOX 4)
REFUSED	9	(BOX 4)

{Are you/Is {NAME}} {CHILD}'s…

HELP TEXT:
Full Brother: A male with whom the child shares the same biological parents.

Half Brother: A male with whom the child shares one biological parent.

Step Brother: A male to whom the child is unrelated except by the marriage of one biological parent.

Adoptive Brother: A male to whom the child is unrelated except that they are in the same family in which he or the child has been legally adopted by the family.

Foster Brother: A male to whom the child is unrelated except that they are in the same family in which he or the child have been taken into the home on a temporary basis and the parents have legal responsibility for the child.

Full brother,...	1	(BOX 4)
Half brother,..	2	(BOX 4)
Step brother, ...	3	(BOX 4)
Adoptive brother, or	4	(BOX 4)
Foster brother?	5	(BOX 4)
DON'T KNOW	7	(BOX 4)
REFUSED	9	(BOX 4)

CODE NON-RELATIVE RELATIONSHIP BELOW IF MORE DESCRIPTIVE.

HELP TEXT:

Girlfriend or Partner of CHILD's Parent/Guardian: The female who has a "partner-like" relationship with one of the child's parents or guardians. "Living as married" is another way of describing the relationship.

Boyfriend or Partner of CHILD's Parent/Guardian: The male who has a "partner-like" relationship with one of the child's parents or guardians. "Living as married" is another way of describing the relationship.

Female Guardian: The female legally placed in charge of the affairs of the child.

Male Guardian: The male legally placed in charge of the affairs of the child.

Daughter/son of CHILD's Parent's Partner: The child of the person who has a "partner-like" relationship with one of the child's parents or guardians.

Other Relative of CHILD's Parent's Partner: Some other relative of the person who has a "partner-like" relationship with one of the child's parents or guardians.

Other Non-relative: If one of the codes for non-relative above does not better describe the relationship of the person to the child, and there is no family relationship through blood, marriage, adoption, or partnership (i.e., living together as married), use this code.

CAPI INSTRUCTION: IF FSQ.180 IS CODED 1 (GIRLFRIEND), FLAG RESPONSE TO FSQ.130 AS CODE 5.

CAPI INSTRUCTION: IF FSQ.180 IS CODED 2 (BOYFRIEND), FLAG RESPONSE TO FSQ.130 AS CODE 6.

CAPI INSTRUCTION: IF FSQ.180 IS CODED 3 (FEMALE GUARDIAN), FLAG RESPONSE TO FSQ.130 AS CODE 1 AND RESPONSE TO FSQ.140 AS CODE 4.

CAPI INSTRUCTION: IF FSQ.180 IS CODED 4 (MALE GUARDIAN), FLAG RESPONSE TO FSQ.130 AS CODE 2 AND RESPONSE TO FSQ.150 AS CODE 4.

GIRLFRIEND OR PARTNER OF {CHILD}'S
    PARENT/GUARDIAN... 1 (BOX 4)
BOYFRIEND OR PARTNER OF {CHILD}'S
    PARENT/GUARDIAN... 2 (BOX 4)
FEMALE GUARDIAN... 3 (BOX 4)
MALE GUARDIAN .... 4 (BOX 4)
DAUGHTER/SON OF {CHILD}'S PARENT'S PARTNER........................ 5 (BOX 4)
OTHER RELATIVE OF {CHILD}'S PARENT'S PARTNER...................... 6 (FSQ.181)
    SPECIFY _____
DON'T KNOW .... 7 (BOX 4)
REFUSED .... 9 (BOX 4)

FSQ.181   SPECIFY OTHER NON-RELATIVE.

_____
OTHER NON-RELATIVE

```
┌─────────────────────────────────────────────────────────────────────┐
│                              BOX 4                                    │
│                                                                       │
│  END LOOP 1.                                                          │
│                                                                       │
│  ■    ASK FSQ.130 - FSQ.181 FOR NEXT NEW PERSON ON THE HOUSEHOLD     │
│       ROSTER WHO IS NOT THE FOCAL CHILD.                              │
│                                                                       │
│  ■    IF NO NEXT PERSON, CONTINUE WITH BOX 4A.                        │
└─────────────────────────────────────────────────────────────────────┘
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┌─────────────────────────────────────────────────────────────────────┐
│                              BOX 4A                                   │
│                                                                       │
│  LOOP 2.                                                              │
│  ■    IF ANY RESPONDENT, MOTHER FIGURE, OR FATHER FIGURE, OR          │
│       RESPONDENT AND RESPONDENT'S SPOUSE (IF NO MOTHER OR             │
│       FATHER FIGURES) (NEW OR OLD HH MEMBERS) IS MISSING ETHNICITY    │
│       OR RACE DATA, CONTINUE WITH FSQ.190.                            │
│                                                                       │
│  ■    OTHERWISE, GO TO FSQ.200.                                       │
└─────────────────────────────────────────────────────────────────────┘
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FSQ.190   **HELP AVAILABLE**

{Are you/Is {NAME}} of Hispanic origin?

HELP TEXT:
   Hispanic or Latino Origin: A person of Cuban, Mexican, Puerto Rican, South or Central
   American, or other Spanish cultures or origin (or descent), regardless of race.

CAPI MATRIX INSTRUCTIONS:

   DISPLAY IN COLUMN 1 EACH PERSON ENUMERATED ON THE HOUSEHOLD ROSTER (AT
   FSQ.020) WHO IS THE FOCAL CHILD, RESPONDENT, MOTHER FIGURE (CODE '1' AT
   FSQ.130), OR FATHER FIGURE (CODE '2' AT FSQ.130).

   IF NO MOTHER OR FATHER FIGURES IN THE HOUSEHOLD (NO HOUSEHOLD MEMBERS
   WITH A CODE '1' OR '2' AT FSQ.130), DISPLAY IN COLUMN 1 THE FOCAL CHILD, THE
   RESPONDENT, AND THE RESPONDENT'S SPOUSE/PARTNER (HOUSEHOLD MEMBER
   SELECTED AT FSQ.120, IF ANY).

   NOTE: IF THE RESPONDENT IS A MOTHER OR FATHER FIGURE, ONLY DISPLAY
   HIS/HER NAME ONCE.

   NOTE: DO NOT DISPLAY HOUSEHOLD MEMBERS CODED AS NOT LIVING IN THE
   HOUSEHOLD AT FSQ.010.

   NOTE: IF COOPERATING RESPONDENT, ASK ABOUT HISPANIC ORIGIN AND RACE
   ONLY IF NEW HOUSEHOLD MEMBERS ARE THE FOCAL CHILD'S PARENTS OR THE
   RESPONDENT OR IF THERE ARE NO PARENTS, THEN ABOUT THE RESPONDENT AND
   RESPONDENT'S SPOUSE/PARTNER (IF THEY ARE NEW OR IF MISSING FOR PREVIOUS
   HH MEMBERS.)

   IF PREVIOUS ROUND NON-RESPONDENT, ASK ABOUT HISPANIC ORIGIN AND RACE
   FOR THE FOCAL CHILD, RESPONDENT. MOTHER AND FATHER FIGURES. IF NO
   MOTHER OR FATHER FIGURES, THEN ASK ABOUT THE FOCAL CHILD. THE
   RESPONDENT, AND THE RESPONDENT'S SPOUSE/PARTNER (IF ANY).

THE CURSOR SHOULD BE POSITIONED ON THE FIRST BLANK FIELD.

```
YES ............................................... 1
NO ................................................ 2
DON'T KNOW ................................... 7
REFUSED ....................................... 9
```

FSQ.195   **HELP AVAILABLE**

What is {your/{NAME}'s} race?

CODE ALL THAT APPLY.

HELP TEXT:

American Indian or Alaska Native: A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Black or African American: A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

CAPI MATRIX INSTRUCTIONS:

DISPLAY IN COLUMN 1 EACH PERSON ENUMERATED ON THE HOUSEHOLD ROSTER (AT FSQ.020) WHO IS THE FOCAL CHILD, RESPONDENT, MOTHER FIGURE (CODE '1' AT FSQ.130), OR FATHER FIGURE (CODE '2' AT FSQ.130).

IF NO MOTHER OR FATHER FIGURES IN THE HOUSEHOLD (NO HOUSEHOLD MEMBERS WITH A CODE '1' OR '2' AT FSQ.130), DISPLAY IN COLUMN 1 THE FOCAL CHILD, THE RESPONDENT, AND THE RESPONDENT'S SPOUSE/PARTNER (HOUSEHOLD MEMBER SELECTED AT FSQ.120, IF ANY).

NOTE: IF THE RESPONDENT IS A MOTHER OR FATHER FIGURE, ONLY DISPLAY HIS/HER NAME ONCE.

IF CODE '6' (ANOTHER RACE) IS CHOSEN, DISPLAY THE 'RACE OS' COLUMN (FSQ.198) FOR COMPLETION.

NOTE: IF COOPERATING RESPONDENT, ASK ABOUT HISPANIC ORIGIN AND RACE ONLY IF NEW HOUSEHOLD MEMBERS ARE THE FOCAL CHILD'S PARENTS OR THE RESPONDENT OR IF THERE ARE NO PARENTS, THEN ABOUT THE RESPONDENT AND RESPONDENT'S SPOUSE/PARTNER (IF THEY ARE NEW OR IF MISSING FOR PREVIOUS HH MEMBERS.)

IF PREVIOUS ROUND NON-RESPONDENT, ASK ABOUT HISPANIC ORIGIN AND RACE FOR THE FOCAL CHILD, RESPONDENT. MOTHER AND FATHER FIGURES. IF NO MOTHER OR FATHER FIGURES, THEN ASK ABOUT THE FOCAL CHILD. THE RESPONDENT, AND THE RESPONDENT'S SPOUSE/PARTNER (IF ANY).

NOTE: DO NOT DISPLAY HOUSEHOLD MEMBERS CODED AS NOT LIVING IN THE HOUSEHOLD AT FSQ.010.

```
AMERICAN INDIAN OR ALASKA NATIVE ..   1
ASIAN ........................................   2
BLACK OR AFRICAN AMERICAN ..............   3
NATIVE HAWAIIAN OR OTHER
  PACIFIC ISLANDER .................................   4
WHITE ........................................   5
ANOTHER RACE (SPECIFY) .....................   6   (FSQ.198)
DON'T KNOW ...........................................   7
REFUSED .................................................   9
```

FSQ.198   [What is {your/{NAME}'s} race?]

ENTER OTHER-SPECIFY TEXT.

_____
OTHER RACE

BOX 4B

END LOOP 2.

- ASK FSQ.190 – FSQ.198 FOR NEXT MOTHER, FATHER FIGURE, OR RESPONDENT OR RESPONDENT'S SPOUSE (IF NO MOTHER OR FATHER FIGURES) (NEW OR OLD HH MEMBERS) WHOSE ETHNICITY OR RACE DATA IS MISSING.

- IF NO NEXT PERSON, CONTINUE WITH FSQ.200.

FSQ.200   {FILL 1} currently married, separated, divorced, widowed, or {FILL 2} never been married?

SEE ATTACHED FOR FILL SPECIFICATIONS.

```
MARRIED ....................................   1
SEPARATED .............................   2
DIVORCED ................................   3
WIDOWED .................................   4
NEVER MARRIED ....................   5
DON'T KNOW ...........................   7
REFUSED .................................   9
```

BOX 5

GO TO SECTION TUQ (TIME USE).

FSQ200 FILL SPECIFICATIONS

{FILL 1} currently married, separated, divorced, widowed, or {FILL 2} never been married?

{FILL 1}	{FILL 2}	ParentIsR FSQ140=1 or 2 OR FSQ150=1 or 2 for the person flagged as the respondent for YES	BioMoInHH FSQ140=1 for at least one HH member (not the R) for YES	BioFaInHH FSQ150=1 for at least one HH member (not the R) for YES	AdopMoInHH FSQ140=2 for at least one HH member (not the R) for YES	AdopFaInHH FSQ150=2 for at least one HH member (not the R) for YES
Are you	have you	YES				
Are CHILD's biological parents	have they	NO	YES	YES		
Are CHILD's biological parents	have they	NO	NO	NO	NO	NO
Is CHILD's biological mother	has she	NO	YES	NO		
Is CHILD's biological father	has he	NO	NO	YES		
Is CHILD's adoptive mother	has she	NO	NO	NO	YES	NO
Is CHILD's adoptive father	has he	NO	NO	NO	NO	YES
Are CHILD's adoptive parents	have they	NO	NO	NO	YES	YES

BOX 1

- IF NumberOfChildren = 1 OR
  IF NumberOfChildren = 2 AND ChildNum = 1, CONTINUE WITH TUQ.010
- IF NumberOfChildren = 2 AND ChildNum = 2, GO TO BOX 3.

TUQ.010　　Now, I'd like to get an idea of how {CHILD} spent {his/her} time over the summer. First, I'd like to find out how much time {CHILD} had for summer vacation after the school year ended. On about what date did {CHILD}'s school let out for the summer?

ENTER MONTH.

CAPI INSTRUCTIONS: RANGE CHECK 1-12 FOR MONTH.

|___|___|
ENTER MONTH
　or
REFUSED 77
DON'T KNOW 99

TUQ.015　　[Now, I'd like to get an idea of how {CHILD} spent {his/her} time over the summer. First, I'd like to find out how much time {CHILD} had for summer vacation after the school year ended. On about what date did {CHILD}'s school let out for the summer?]

ENTER DAY.

CAPI INSTRUCTIONS: IF MONTH = 1, 3, 5, 7, 8, 10, OR 12, DAY CAN BE 1-31. IF MONTH = 2, DAY CAN BE 1-28. IF MONTH = 4, 6, 9, 11, DAY CAN BE 1-30.

|___|___|
ENTER DAY
　or
REFUSED 77
DON'T KNOW 99

TUQ.020　　On what date did school start again?

ENTER MONTH.

CAPI INSTRUCTIONS: RANGE CHECK 1-12 FOR MONTH.

|___|___|
ENTER MONTH
　or
REFUSED 77
DON'T KNOW 99

TUQ.025   [On what date did school start again?]

                 ENTER DAY.

                 CAPI INSTRUCTIONS: IF MONTH = 1, 3, 5, 7, 8, 10, OR 12, DAY CAN BE 1-31. IF MONTH = 2,
                       DAY CAN BE 1-28. IF MONTH = 4, 6, 9, 11, DAY CAN BE 1-30.

                                        |___|___|
                                        ENTER DAY
                                           or
                                        REFUSED 77
                                        DON'T KNOW 99

BOX 1A

■   CAPI SHOULD CALCULATE WEEKS OUT OF SCHOOL BASED ON
        ANSWERS TO TUQ.010, TUQ.015, TUQ.020 AND TUQ.025. IF CHILD WAS
        OUT OF SCHOOL FOR LESS THAN 2 WEEKS, GO TO BOX 4.
■   IF DK OR REFUSED (TUQ.010 = 77 OR 99) AND/OR (TUQ.015 = 77 OR 99)
        AND/OR (TUQ.020 = 77 OR 99) AND/OR (TUQ.025 = 77 OR 99) THEN GO
        TO TUQ.035.
■   OTHERWISE, GO TO TUQ.040.

TUQ.035   Was {CHILD}'s vacation 2 weeks or longer?

                                        YES.. 1
                                        NO 2   (GO TO BOX 4)
                                        REFUSED 7   (GO TO BOX 4)
                                        DON'T KNOW 9   (GO TO BOX 4)

                                                                                         HELP AVAILABLE
TUQ.040   Some children go away during the summer for short periods of time to stay with relatives, to go to
                 camp, or to go to other places. Please tell me, during the time that {CHILD} was out of regular school,
                 how many weeks was {he/she} not staying with you, either at home or at another place?

                 ENTER NUMBER OF WEEKS.

                 HELP TEXT:
                 If child was away from parent on a regular basis a few days a week (e.g., every weekend), do not count
                 this.

                 CAPI INSTRUCTION: HARD RANGE CHECK 0 – 16 WEEKS.

                                        |___|___|
                                        ENTER WEEKS
                                           or
                                        REFUSED 77
                                        DON'T KNOW 99

BOX 2

■   IF CHILD WAS AWAY FROM HOME AT LEAST A WEEK (TUQ.040 ¾ 1), GO
        TO TUQ.060.
■   OTHERWISE, GO TO BOX 3.

TUQ.060   Where was {CHILD} when {he/she} was not with you?

       CODE ALL THAT APPLY

           WITH A PARENT....................................... 1
           WITH ANOTHER RELATIVE 2
           AT CAMP 3
           SOME OTHER PLACE
           (SPECIFY)_____ 91
           REFUSED 7
           DON'T KNOW 9

BOX 2A

IF TUQ.060 IS CODED 91, CONTINUE WITH TUQ.060OS.
OTHERWISE, GO TO BOX 3.

TUQ.060OS [Where was {CHILD} when {he/she} was not with you?]

       SPECIFY OTHER PLACE.

         _____
              OTHER PLACE

       CAPI INSTRUCTION: DK AND RF DISALLOWED.

BOX 3

IF NUMBEROFCHILDREN=2 AND CHILDNUM=2 AND HEQ AND CCQ
WERE NOT ASKED ABOUT CHILD 1, GO TO BOX 4.
OTHERWISE, GO TO SECTION HEQ (HOME ENVIRONMENT,
ACTIVITIES, AND COGNITIVE STIMULATION).

BOX 4

GO TO SECTION NEQ (NEIGHBORHOOD QUESTIONS).

HOME ENVIRONMENT, ACTIVITIES, AND COGNITIVE STIMULATION (*FALL FIRST GRADE*) - HEQ

BOX 1

ASK HEQ.010 – HEQ.480 FOR EACH SAMPLED CHILD.

<div align="right">HELP AVAILABLE</div>

HEQ.010   Now I'd like to talk with you about {CHILD}'s activities with family members during a week of the summer. {Since {CHILD} was not with you for a lot of the summer, please just answer questions about activities that you happen to know about.} Thinking about the **week right after July 4th**, how often did you or any other family member …

HELP TEXT:
If respondent asks what family means, say that we mean any person who lives in the child's household and any relative of the child living outside the child's household.

{PROBE: Would you say never, once or twice, 3-6 times, or every day?}

IF CHILD WAS IN CAMP OR ON VACATION SAY, Just give your best estimate.

CAPI INSTRUCTION: DISPLAY "Since {CHILD} … to know about." IF TUQ.040 $\geq$ 4. OTHERWISE, USE A NULL DISPLAY.

CAPI INSTRUCTION: DISPLAY "PROBE: Would……… every day?" IF AT b OR c.

CAPI INSTRUCTION: DISPLAY "week right after July 4th" IN BRIGHT WHITE.

	NEVER	ONCE OR TWICE	3-6 TIMES	EVERY DAY	REFUSED	DON'T KNOW
a. Do math activities with {CHILD}, such as learning numbers, adding, subtracting, or measuring. Would you say never, once or twice, 3-6 times, or every day?	1	2	3	4	7	9
b. Do writing activities with {him/her}?	1	2	3	4	7	9
c. Read books to {him/her}?	1	2	3	4	7	9

BOX 1A

- IF HEQ.010c = 1, 7, or 9, GO TO HEQ.030.
- OTHERWISE, ASK HEQ.020.

HEQ.020   Thinking about this week following July 4th, when you or another family member read to {CHILD}, how long was {he/she} generally read to each time?   Would you say ...

15 minutes or less, ...	1
16 to 29 minutes,..	2
30 to 45 minutes, or....................................	3
45 minutes or more?...................................	4
REFUSED	7
DON'T KNOW	9

HEQ.030   During this week, how often did {CHILD} look at or read books **on {his/her} own?** Would you say ...

CAPI INSTRUCTION: DISPLAY "on {his/her} own" IN BRIGHT WHITE.

Never,... 1
Once or twice,... 2
3 to 6 times, or 3
Every day? 4
REFUSED 7
DON'T KNOW 9

HEQ.035   Again, thinking about the **week right after July 4th**, I'd like to now ask you about different kinds of activities {CHILD} did, either alone or with other people. In this week, how often did {CHILD}…

PROBE: Would you say never, once or twice, 3-6 times, or every day?

PROBE: IF CHILD WAS IN CAMP OR ON VACATION SAY, Just give your best estimate.

CAPI INSTRUCTION: DISPLAY "week right after July 4th" IN BRIGHT WHITE.

CAPI INSTRUCTION: DISPLAY PROBING INSTRUCTIONS IN SQUARE BRACKETS WHEN ON HEQ.035b-q.

	NEVER	ONCE OR TWICE	3-6 TIMES	EVERY DAY	REFUSED	DON'T KNOW
a. Help with family chores?	1	2	3	4	7	9
b. Play outside actively (for example, running, jumping, or swinging)?	1	2	3	4	7	9
c. Do pretend play (for example, play with dolls, dressed up, or pretended to be someone else)?	1	2	3	4	7	9
d. Play board or card games?	1	2	3	4	7	9
e. Do arts or crafts?	1	2	3	4	7	9
f. Use the computer for games like Nintendo or Sega?	1	2	3	4	7	9
g. Use the computer for educational purposes?	1	2	3	4	7	9

HEQ.037   During this week, did {CHILD} watch…

		YES	NO	REFUSED	DON'T KNOW
a.	Children's programs such as those on Nickelodeon or the Disney Channel, or programs such as Sesame Street, Reading Rainbow, or Magic School Bus?...........................	1	2	7	9

CODE '3' IF NO TV.

CAPI INSTRUCTION: IF CODED 3, GO TO HEQ.050.

		YES	NO	REFUSED	DON'T KNOW
b.	Cartoons?	1	2	7	9
c.	Children's videos or movies?	1	2	7	9
d.	Educational programs designed for a general audience, such as those on the Discovery or Learning Channel or programs such as National Geographic or NOVA?	1	2	7	9
e.	Sports?	1	2	7	9
f.	Situation comedies or sit-coms that come on in the evening, including re-runs?	1	2	7	9
g.	Soap Operas?	1	2	7	9
h.	Talk shows?	1	2	7	9
i.	News shows or news channels?..	1	2	7	9

HELP AVAILABLE

HEQ.038   During the week after the 4th of July, on average about how many hours of television or video tapes did {CHILD} watch **at home** each weekday, that is, Monday through Friday? How about…

     A.   Before breakfast?
     B.   Between breakfast and dinner time?
     C.   After dinner time?

HELP TEXT:
If no television was watched, enter 0 at the hour field and 0 at the minute field.

CAPI INSTRUCTIONS:

1.   DISPLAY "at home" IN BRIGHT WHITE.

2.   DISPLAY THE FOLLOWING MATRIX IN THE RESPONSE FIELD:

	HOURS	MINUTES
Before breakfast		
Between breakfast and dinner time		
After dinner time		

3.   WHEN CURSOR IS ON THE HOUR FIELDS, DISPLAY 'INTERVIEWER INSTRUCTION: ENTER NUMBER OF HOURS. IF LESS THAN AN HOUR, ENTER '0.'

4.   WHEN CURSOR IS ON THE MINUTE FIELDS, DISPLAY 'INTERVIEWER INSTRUCTION: ENTER NUMBER OF MINUTES.'

5. WHEN CURSOR IS ON THE HOUR FIELDS OF HEQ.038B OR HEQ.038C, OR ANY OF THE MINUTE FIELDS, DISPLAY 'During the week….How about…' IN SQUARE BRACKETS.

6. DK AND RF ALLOWED AT ALL FIELDS. EMPTY IS ALLOWED FOR MINUTES, BUT NOT FOR HOURS.

7. USE THE FOLLOWING SKIP INSTRUCTIONS FOR DK OR RF AT HOUR FIELDS:

IF DK OR RF AT:	SKIP TO	ELSE
HEQ.038A HOUR FIELD	HEQ.038B	CONTINUE WITH MINUTE
HEQ.038B HOUR FIELD	HEQ.038C	CONTINUE WITH MINUTE
HEQ.038C HOUR FIELD	HEQ.039	CONTINUE WITH MINUTE

8. HARD RANGE: 0 - 10 FOR HOURS; 0 - 59 FOR MINUTES. THE TOTAL OF THE THREE TIME FRAMES SHOULD NOT EXCEED 24 HOURS. OTHERWISE, DISPLAY ERROR MESSAGE: "The total number of hours exceeds 24!"

HELP AVAILABLE

HEQ.038a   How about on Saturday and Sunday? Thinking about the entire day, how many hours did {CHILD} watch television or video tapes **at home** on…

A. Saturday?
B. Sunday?

HELP TEXT:
If no television was watched, enter 0 at the hour field and 0 at the minute field.

CAPI INSTRUCTIONS:

1. DISPLAY "at home" IN BRIGHT WHITE.

2. DISPLAY THE FOLLOWING MATRIX IN THE RESPONSE FIELD:

	HOURS	MINUTES
Saturday		
Sunday		

3. WHEN CURSOR IS ON THE HOUR FIELDS, DISPLAY 'INTERVIEWER INSTRUCTION: ENTER NUMBER OF HOURS. IF LESS THAN AN HOUR, ENTER '0.'

4. WHEN CURSOR IS ON THE MINUTE FIELDS, DISPLAY 'INTERVIEWER INSTRUCTION: ENTER NUMBER OF MINUTES.'

5. WHEN CURSOR IS ON THE HOUR FIELD OF HEQ.038aB OR ANY OF THE MINUTE FIELDS, DISPLAY 'How about…at home on…' IN SQUARE BRACKETS.

6. DK AND RF ALLOWED AT ALL FIELDS. EMPTY IS ALLOWED FOR MINUTES, BUT NOT FOR HOURS.

7. USE THE FOLLOWING SKIP INSTRUCTIONS FOR DK OR RF AT HOUR FIELDS:

IF DK OR RF AT:	SKIP TO	ELSE
HEQ.038aA HOUR FIELD	HEQ.038aB	CONTINUE WITH MINUTE
HEQ.038aB HOUR FIELD	HEQ.039	CONTINUE WITH MINUTE

8.   HARD RANGE: 0 - 24 HOUR FIELDS; 0 - 59 FOR MINUTE FIELDS. THE TOTAL OF THE THREE TIME FRAMES SHOULD NOT EXCEED 24 HOURS. OTHERWISE, DISPLAY ERROR MESSAGE: "The total number of hours exceeds 24!"

HEQ.039   Now, I'd like you to think about some things {CHILD} may have done at some time during the **entire summer**. Thinking now about the **entire summer**, were there family rules for {CHILD} about any of the following television-related activities?

CAPI INSTRUCTIONS: DISPLAY "entire summer" IN BRIGHT WHITE.

		YES	NO	REFUSED	DON'T KNOW
a.	What programs {CHILD} can watch?	1	2	7	9
b.	How early or late {he/she} may watch television?	1	2	7	9
c.	How many hours {he/she} may watch television overall?	1	2	7	9
d.	How many hours {he/she} may watch television on weekdays?	1	2	7	9

HEQ.040   During the summer, how often did your family watch TV together? Would you say…

Often,	1	
Sometimes,	2	
Hardly ever, or	3	
Never?	4	(HEQ.050)
REFUSED	7	(HEQ.050)
DON'T KNOW	9	(HEQ.050)

HEQ.045   When your family watched TV together during the summer, how often did you or another family member discuss TV programs with {CHILD}? Would you say…

Often,	1
Sometimes,	2
Hardly ever, or	3
Never?	4
REFUSED	7
DON'T KNOW	9

HEQ.050   About how many times during **the summer** did {CHILD} go to the library?

CAPI INSTRUCTIONS: DISPLAY "the summer" IN BRIGHT WHITE.

CAPI INSTRUCTION: HARD RANGE 0 – 97.

|___|___|
ENTER # OF TIMES
  or
REFUSED 77
DON'T KNOW 99

BOX 2

- IF HEQ.050 = 0, 77, or 99, GO TO HEQ.070.
- OTHERWISE, GO TO HEQ.060.

HEQ.060   Did {he/she} participate in any story hours at the library?

YES... 1
NO 2
REFUSED 7
DON'T KNOW 9

HEQ.070   About how many times during the summer did {CHILD} go to a bookstore?

CAPI INSTRUCTION: HARD RANGE 0 – 97.

|___|___|
ENTER # OF TIMES
  or
REFUSED 77
DON'T KNOW 99

BOX 3

- IF HEQ.070 = 0, 77 or 99, GO TO HEQ.100.
- OTHERWISE, GO TO HEQ.080.

HEQ.080   Did {he/she} participate in any story hours at the bookstore?

YES... 1
NO 2
REFUSED 7
DON'T KNOW 9

HEQ.100   Did {CHILD} take any vacations, including short trips, with your family, or any of {his/her} other relatives, this summer?

HELP TEXT:
    Vacations: Please include any overnight trips as vacations. Family camps should also be included. However, please do not count summer camp, or any camps that the focal child attended alone.

                    YES.. 1
                    NO 2
                    REFUSED 7
                    DON'T KNOW 9

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┌─────────────────────────────────────────────────────────────────────┐
│                              BOX 4                                    │
│                                                                       │
│  ■   IF NumberOfChildren = 1 AND HEQ.100 = 1, GO TO HEQ.130.          │
│      ELSE GO TO HEQ.150.                                              │
│  ■   IF NumberOfChildren = 2 AND ChildNum = 1 AND HEQ.100 = 1, GO TO  │
│      HEQ.130.  OTHERWISE, GO TO HEQ.150.                              │
│  ■   IF NumberOfChildren = 2 AND ChildNum = 2:                        │
│      ■   IF HEQ.100 = 1 FOR ChildNum = 2 AND ChildNum = 1, GO TO HEQ.120.│
│      ■   IF HEQ.100 = 1 FOR ChildNum = 2 BUT HEQ.100 ≠ 1 FOR ChildNum = 1,│
│          GO TO HEQ.130.                                               │
│      ■   IF HEQ.100 = 2, 7, 9 FOR ChildNum = 2, GO TO HEQ.150.        │
│  ■   OTHERWISE, GO TO HEQ.150.                                        │
└─────────────────────────────────────────────────────────────────────┘
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HEQ.120   Did {CHILD2} go on the same vacations as {CHILD1}?

HELP TEXT:
If CHILD2 went on some of the same vacations as child 1 but not on others, code 'no.'

                    YES.. 1   (HEQ.150)
                    NO 2
                    REFUSED 7
                    DON'T KNOW 9

HEQ.130   About how many days did {CHILD} spend on vacations?

HELP TEXT:
If there was more than one vacation, add the time for all vacations together. If moved to summer home, code '0'.

CAPI INSTRUCTION: HARD RANGE 1–120.

                    |___|___|___|
                    ENTER # DAYS
                          or
                    ENTIRE SUMMER   0
                    REFUSED 777
                    DON'T KNOW 999

HEQ.150   During the summer, did you or another family member take {CHILD} to any of the following places?

		YES	NO	REFUSED	DON'T KNOW
a.	Art, science, or discovery museums?	1	2	7	9
b.	Historical sites?	1	2	7	9
c.	Zoos or aquariums?	1	2	7	9
d.	Amusement parks?..	1	2	7	9
e.	Beaches, lakes, or rivers?...	1	2	7	9
f.	Plays or concerts?...	1	2	7	9
g.	State or national parks?..	1	2	7	9
h.	A large city (other than where {CHILD} lives)?....................	1	2	7	9

HEQ.220   Summer school includes programs that schools suggest or require a child to attend, and also school enrichment programs that are optional. Did {CHILD} attend summer school this summer? Please don't include summer camp.

                        YES.. 1
                        NO 2
                        REFUSED 7
                        DON'T KNOW 9

BOX 5

■   IF NumberOfChildren = 1 AND HEQ.220 = 1, GO TO HEQ.230A.
    ELSE, GO TO HEQ.290.
■   IF NumberOfChildren = 2 AND ChildNum = 1, AND HEQ.220 = 1, GO TO
    HEQ.230A. OTHERWISE, GO TO HEQ.290.
■   IF NumberOfChildren = 2 AND ChildNum = 2:
    ■   IF HEQ.220 = 1 FOR ChildNum = 2 AND ChildNum = 1, GO TO HEQ.225.
    ■   IF HEQ.220 = 1 FOR ChildNum = 2 BUT HEQ.220 ≠ 1 FOR ChildNum = 1,
        GO TO HEQ.230A.
    ■   IF HEQ.220 = 2, 7, 9 FOR ChildNum = 2, GO TO HEQ.290.
■   OTHERWISE, GO TO HEQ.290.

HEQ.225   Was {CHILD2}'s summer school or school enrichment program the same as {CHILD1}'s?

                        YES.. 1   (HEQ.290)
                        NO 2
                        REFUSED 7
                        DON'T KNOW 9

HEQ.230A   When did the program start? ENTER MONTH.

            CAPI INSTRUCTION: RANGE CHECK: 1-12.

                        |___|___|
                        ENTER MONTH

HEQ.230B   [When did the program start?] ENTER DAY.

             CAPI INSTRUCTION: RANGE CHECK:
             IF MONTH AT HEQ.230A = 1, 3, 5, 7, 8, 10 OR 12, DAY CAN BE 1-31.
             IF MONTH AT HEQ.230A = 2, DAY CAN BE 1-28.
             IF MONTH AT HEQ.230A = 4, 6, 9, OR 11, DAY CAN BE 1-30.

                         |___|___|
                         ENTER DAY

HEQ.240A   When did the program end? ENTER MONTH.

             CAPI INSTRUCTION: RANGE CHECK: 1-12.

                         |___|___|
                         ENTER MONTH

HEQ.240B   [When did the program end?] ENTER DAY.

             CAPI INSTRUCTION: RANGE CHECK:
             IF MONTH AT HEQ.230A = 1, 3, 5, 7, 8, 10 OR 12, DAY CAN BE 1-31.
             IF MONTH AT HEQ.230A = 2, DAY CAN BE 1-28.
             IF MONTH AT HEQ.230A = 4, 6, 9, OR 11, DAY CAN BE 1-30.

                         |___|___|
                         ENTER DAY

HEQ.250   How many **days a week** did {CHILD} attend summer school or the school enrichment program?

             CAPI INSTRUCTION: DISPLAY "days a week" IN BRIGHT WHITE.

             CAPI INSTRUCTION: SOFT RANGE 1-5; HARD RANGE 1-7.

                         |___|___|
                         ENTER DAYS
                            or
                         REFUSED 77
                         DON'T KNOW 99

HEQ.260   How many **hours a day** did {CHILD} attend this program?

             CAPI INSTRUCTION: DISPLAY "hours a day" IN BRIGHT WHITE.

             CAPI INSTRUCTION: SOFT RANGE 1-6; HARD RANGE 1-8.

                         |___|___|
                         ENTER HOURS
                            or
                         REFUSED 77
                         DON'T KNOW 99

HEQ.270   Did this program include...

		YES	NO	REFUSED	DON'T KNOW
a.	Reading?	1	2	7	9
b.	Math?	1	2	7	9
c.	Social Studies?	1	2	7	9
d.	Science?	1	2	7	9
e.	Foreign language?	1	2	7	9
f.	Art?	1	2	7	9
g.	Dance?..	1	2	7	9
h.	Music?	1	2	7	9
i.	Computers?	1	2	7	9
j.	Sports?	1	2	7	9

HEQ.280   Was the summer school a program …

Required by the school, ... 1
Suggested by the school, or 2
A program you decided to send {him/her} to? 3
REFUSED.. 7
DON'T KNOW 9

HEQ.290   Some children receive services such as speech or physical therapy during the school year. Did {CHILD} receive such services during the last school year?

YES.. 1
NO 2 (HEQ.300)
REFUSED 7 (HEQ.300)
DON'T KNOW 9 (HEQ.300)

HEQ.295   Did {CHILD} continue to receive that service during the summer?

YES.. 1
NO 2
REFUSED 7
DON'T KNOW 9

HEQ.298   Did {CHILD} receive…   **HELP AVAILABLE**

		YES	NO	RF	DK
a.	Speech or language therapy?	1	2	7	9
b.	Physical or occupational therapy?...................................	1	2	7	9
c.	Psychological or psychiatric therapy?	1	2	7	9
d.	Any other kind of therapy?..	1	2	7	9

Speech or Language Therapy: Therapy involving the evaluation or treatment of the student's speech or language abilities. Impairments to speech can include one or more of the following: **articulation errors** (includes omitting words, substituting words, or distorting sounds), **inappropriate voice** (including pitch, loudness, or voice quality), or **abnormal fluency** (including, abnormal rate of speaking, speech interruptions, repetitions of sounds, words, phrases or sentences). Impairments to language can include improper use of phonemes, syntax, or semantics. Language impairments can also stem from improper practical use of language. Therapy includes special techniques to overcome speech or language limitations. Therapy should be provided **only** by a teacher of the speech or language impaired who is certified by the state, or by a certified Speech and Language Therapist/Pathologist.

Physical Therapy: Therapy involving the evaluation or treatment of health problems resulting from injury or disease. It is also sometimes called physiotherapy. Physical therapists assess joint motion, muscle strength and endurance, how well the heart and lungs work, and how well children can do activities required for daily living. Treatment includes therapeutic exercise, cardiovascular endurance training, and training in activities of daily living, as well as the use of massage, light, cold, heat, electricity, and mechanical devices to treat physical disorders.   Physical therapy does not include the use of X-Ray technology. Therapy should be provided **only** by a therapist who has been state-certified to provide such services.

Occupational Therapy: Therapy involving the evaluation or treatment of the student's level of independence in daily living activities. The goal of occupational therapy is to promote maximum independence in daily living. Therapy can include the use of work, play, or self-care activities to improve functional ability, promote health, prevent injury or further disability. Therapy should be provided **only** by a therapist who has been certified by the American Occupational Therapy Association or by an occupational therapy assistant who provides therapy under the supervision of a certified occupational therapist.

Psychological Therapy: Services that involve the assessment of academic skills and learning aptitudes, personality and emotional development, social skills and school climates, and eligibility for special education. Treatment involves one-on-one interaction with students or parents to resolve personal conflicts and problems in learning and adjustment, psychological counseling for students and parents, social skills training, and assistance through separation and loss. Within school systems, psychological services are typically provided by certified school psychologists. However, assessment and treatment can be extended to the health community and include services provided by clinical psychologists, psychiatric social workers, or psychiatrists (who are medial doctors).

BOX 5A

- IF HEQ.298d IS CODED '1' (YES), CONTINUE WITH
  HEQ.298OS.
- OTHERWISE, GO TO HEQ.300.

HEQ.298OS   [Did {CHILD} receive any other kind of therapy?]
SPECIFY SERVICE.

_____
SERVICE

CAPI INSTRUCTION: DK AND RF DISALLOWED.

HEQ.300   Did {CHILD} attend any day or overnight camps over the summer? Please do not include regular child
            care in this question, but only programs that are referred to as camp.

                            YES.. 1
                            NO 2   (BOX 6)
                            REFUSED 7   (BOX 6)
                            DON'T KNOW 9   (BOX 6)

HEQ.305   How many camps did {CHILD} go to?

            PROBE: Different sessions of camp should be counted as different "camps," even if they are held at
            the same location.

            CAPI INSTRUCTION: HARD RANGE 1-16.

                            |___|
                            ENTER NUMBER
                               or
                            REFUSED 77
                            DON'T KNOW 99

            ┌───┐
            │   **BOX 6**   │
            │   │
            │   ■ IF NumberOfChildren = 1 AND HEQ.300 = 1, GO TO HEQ.330. ELSE, GO TO │
            │   HEQ.430.   │
            │   ■ IF NumberOfChildren = 2 AND ChildNum = 1 AND HEQ.300 = 1, GO TO   │
            │   HEQ.330. OTHERWISE, GO TO HEQ.430.   │
            │   ■ IF NumberOfChildren = 2 AND ChildNum = 2:   │
            │   ■   IF HEQ.300 = 1 FOR ChildNum = 1 AND ChildNum = 2, GO TO HEQ.320.│
            │   ■   ELSE, IF HEQ.300 = 1 FOR ChildNum = 2 BUT HEQ.300 ≠ 1 FOR   │
            │   ChildNum = 1, GO TO HEQ.330.   │
            │   ■   ELSE, IF HEQ.300 = 2, 7, 9 FOR ChildNum = 2, GO TO HEQ.430.   │
            │   ■ OTHERWISE, GO TO HEQ.430.   │
            └───┘

HEQ.320   Did {CHILD2} go to {any of} the same {camp/camps} as {CHILD1} this summer?

            CAPI INSTRUCTION: DISPLAY "CAMP" IF CHILD 2 ATTENDED ONE CAMP (HEQ.305 = 1).
            DISPLAY "ANY OF" AND "CAMPS" IF CHILD 2 ATTENDED MORE THAN ONE CAMP (HEQ.305 ≥ 2,
            DK, OR RF).

                            YES.. 1   (HEQ.430)
                            NO 2
                            REFUSED 7
                            DON'T KNOW 9

HEQ.330   {Please answer for the camp where {CHILD} spent the most time during the summer.} How many
            days a week did {CHILD} attend the camp?

            CAPI INSTRUCTION: DISPLAY FIRST SENTENCE IF CHILD ATTENDED MORE THAN ONE CAMP
            (HEQ.305 ≥ 2, DK, OR RF). OTHERWISE, DO NOT USE THIS DISPLAY.

            CAPI INSTRUCTION: DISPLAY "days a week" IN BRIGHT WHITE.

CAPI INSTRUCTION: HARD RANGE 1-7.

|___|
ENTER DAYS
    or
REFUSED 77
DON'T KNOW 99

HEQ.340   How many **hours a day** did {CHILD} attend the camp?

ENTER 24 HOURS IF CHILD WAS IN OVERNIGHT CAMP.

CAPI INSTRUCTION: DISPLAY "hours a day" IN BRIGHT WHITE.

CAPI INSTRUCTION: HARD RANGE CHECK 1-24.

|___|___|
ENTER HOURS
    or
REFUSED 77
DON'T KNOW 99

HEQ.350   About how many **weeks** did {CHILD} attend the camp?

CAPI INSTRUCTION: DISPLAY "weeks" IN BRIGHT WHITE.

CAPI INSTRUCTION: HARD RANGE CHECK 1 – 16 WEEKS.

|___|___|
ENTER # OF WEEKS
    or
REFUSED 77
DON'T KNOW 99

HEQ.360   Did the camp include...

| | | | DON'T |
	YES	NO	REFUSED	KNOW
a. Sports?	1	2	7	9
b. Arts and crafts?	1	2	7	9
c. Field trips?	1	2	7	9
d. Games?	1	2	7	9
e. Nature lessons or science?	1	2	7	9
f. Other academic lessons?	1	2	7	9
g. Music?	1	2	7	9
h. Performing arts or drama?....................................	1	2	7	9
i. Computers?	1	2	7	9

HEQ.430   Was {CHILD} tutored over the summer on a regular basis, by someone other than you or a family member, in a specific subject, such as reading, math, science, or a foreign language?

HELP TEXT:
Tutored: This means being taught individually or in a small group setting. DO NOT include therapy as tutoring.
Regular Basis: A program occurring on a routine schedule (i.e., occurring at least weekly or on some other schedule).
Not a family member: A person who is not related to the focal child and is not living in the same household with the focal child.

```
YES.............................................................   1
NO ..............................................................   2
REFUSED  ...................................................   7
DON'T KNOW  ............................................   9
```

BOX 6A

- IF NumberOfChildren = 1 AND HEQ.430 = 1, CONTINUE WITH HEQ.440. OTHERWISE, GO TO HEQ.480.
- IF NumberOfChildren = 2 AND ChildNum = 1, AND HEQ.430 = 1, CONTINUE WITH HEQ.440. OTHERWISE, GO TO HEQ.480.
- IF NumberOfChildren = 2 AND ChildNum = 2:
    - IF HEQ.430 = 1 FOR ChildNum = 1 AND ChildNum = 2, GO TO HEQ.435.
    - IF HEQ.430 = 1 FOR ChildNum = 1 BUT HEQ.430 ≠ FOR ChildNum = 2, GO   TO HEQ.440.
    - IF HEQ.430 = 2, DK, RF FOR ChildNum = 2, GO TO HEQ.480.
- OTHERWISE, GO TO HEQ.480.

HEQ.435   Were {CHILD 2} and {CHILD 1} tutored together this summer?

```
YES.............................................................   1
NO ..............................................................   2
REFUSED  ...................................................   7
DON'T KNOW  ............................................   9
```

HEQ.440   What was {CHILD} tutored in? CODE ALL THAT APPLY.

PROBE: Anything else?

```
READING .....................................................   1
MATH...........................................................   2
SCIENCE  ....................................................   3
FOREIGN LANGUAGE.................................   4
OTHER (SPECIFY)  _____

_____   91
REFUSED  ...................................................   7
DON'T KNOW  ............................................   9
```

BOX 6B

- IF HEQ.440 IS CODED 91, CONTINUE WITH HEQ.440OS.
- OTHERWISE, GO TO HEQ.450.

HEQ.440OS   [What was {CHILD} tutored in?]
              SPECIFY SUBJECT.

              _____
                              SUBJECT

              CAPI INSTRUCTION: DK AND RF DISALLOWED.

HEQ.450   How many **days a week** was {CHILD} tutored?

              CAPI INSTRUCTION: DISPLAY "days a week" IN BRIGHT WHITE.

              CAPI INSTRUCTION: SORT RANGE CHECK 1-5; HARD RANGE CHECK 1-7.

                              |___|
                              ENTER DAYS
                                or
                              REFUSED 77
                              DON'T KNOW 99

HEQ.460   How many **hours a day** was {CHILD} tutored?

              CAPI INSTRUCTION: DISPLAY "hours a day" IN BRIGHT WHITE.

              CAPI INSTRUCTION: SOFT RANGE 1-6. HARD RANGE CHECK 1-8.

                              |___|___|
                              ENTER HOURS
                                or
                              REFUSED 77
                              DON'T KNOW 99

HEQ.470   About how many **weeks** was {CHILD} tutored?

              CAPI INSTRUCTION: DISPLAY "weeks" IN BRIGHT WHITE.

              IF LESS THAN A WEEK, ENTER '1.'

              CAPI INSTRUCTION: HARD RANGE CHECK 1 – 16 WEEKS.

                              |___|___|
                              ENTER # OF WEEKS
                                or
                              REFUSED 77
                              DON'T KNOW 99

HEQ.480   Did {CHILD} participate in any of the following activities during the summer that were **not** school sponsored, **not** part of camp or child care, or **not** provided by a family member?

CAPI INSTRUCTION: DISPLAY 'not' IN BRIGHT WHITE.

		YES	NO	REFUSED	DON'T KNOW
a.	Music lessons?	1	2	7	9
b.	Dance lessons?	1	2	7	9
c.	Swimming lessons or swim team?......................................	1	2	7	9
d.	Team sports or lessons?	1	2	7	9

HELP TEXT:
Examples of team sports may include soccer, basketball, t-ball, etc.

e.	Individual sports lessons?..	1	2	7	9

HELP TEXT:
Examples of individual sports lessons may include tae kwan do, golf, etc.

f.	Scout groups?	1	2	7	9

HELP TEXT:
Examples of scout groups may include cub scouts, daisies, etc.

BOX 7

■ GO TO CCQ (CHILD CARE).

CHILD CARE (*FALL FIRST GRADE*)- CCQ

BOX 1

- IF NumberOfChildren = 2 AND ChildNum = 2, CONTINUE WITH CCQ.005.
- OTHERWISE, GO TO CCQ.010.

CCQ.005   Next I'd like to talk to you about the child care arrangements you had for {CHILD2} during the summer.

Did {CHILD2} have the same child care arrangements as {CHILD1} during the summer?

YES..	1	(BOX 5)
NO	2	(CCQ.020)
REFUSED	7	(CCQ.020)
DON'T KNOW	9	(CCQ.020)

CCQ.010   Now I'd like to talk to you about child care {CHILD} received **during the summer** on a **regular basis** from someone other than {you/{his/her} {parents/guardians}}. This does not include occasional baby-sitting or backup care providers. It also does not include summer camp.

PRESS ENTER TO CONTINUE.

CAPI INSTRUCTION: DISPLAY "during the summer" AND "regular basis" IN BRIGHT WHITE.

CAPI INSTRUCTION: IF RESPONDENT IS A MOTHER OR FATHER FIGURE (FSQ.130 = 1 OR 2 FOR THE PERSON FLAGGED AS THE RESPONDENT) OR THERE IS NO MOTHER OR FATHER FIGURE IN THE HOUSEHOLD (NO RU MEMBER WITH A CODE OF 1 OR 2 AT FSQ.130), DISPLAY "YOU". OTHERWISE, DISPLAY "{HIS/HER {PARENTS/GUARDIANS}}".

CAPI INSTRUCTION: DISPLAY "PARENTS" IF AT LEAST ONE RU MEMBER, WHO IS NOT FLAGGED AS THE RESPONDENT, IS A MOTHER OR FATHER (FSQ.140 = 1, 2, 3, 7, OR 9 OR FSQ.150 = 1, 2, 3, 7, OR 9). OTHERWISE, DISPLAY GUARDIANS.

HELP AVAILABLE

CCQ.020   Did {CHILD} receive care from a relative on a **regular basis** during the summer? This may include grandparents, brothers and sisters, or any relatives other than {you/{CHILD}'s {parents/guardians}}.

CAPI INSTRUCTION: DISPLAY "regular basis" IN BRIGHT WHITE.

CAPI INSTRUCTION: IF RESPONDENT IS A MOTHER OR FATHER FIGURE (FSQ.130 = 1 OR 2 FOR THE PERSON FLAGGED AS THE RESPONDENT) OR THERE IS NO MOTHER OR FATHER FIGURE IN THE HOUSEHOLD (NO RU MEMBER WITH A CODE OF 1 OR 2 AT FSQ.130), DISPLAY "YOU". OTHERWISE, DISPLAY "{HIS/HER {PARENTS/GUARDIANS}}".

CAPI INSTRUCTION: DISPLAY "PARENTS" IF AT LEAST ONE RU MEMBER, WHO IS NOT FLAGGED AS THE RESPONDENT, IS A MOTHER OR FATHER (FSQ.140 = 1, 2, 3, 7, OR 9 OR FSQ.150 = 1, 2, 3, 7, OR 9). OTHERWISE, DISPLAY GUARDIANS.

HELP TEXT:
Care from a relative: Record care or programs provided by someone other than the child's parents. In all cases, do not include care provided by a parent, even if they do not live in the household. (Do not include visitation with a separated or divorced parent who does not have custody.)

If there is at least one parent in the household, any relative living in the household is eligible to be counted as a care arrangement, if the care is provided on a regularly scheduled basis. Relatives outside the household may also be regular care providers.

If neither parent lives in the household, do not include care provided by guardians who live with the child (they are similar to parents).

Relative care arrangements may or may not have a charge or fee.

Regular Basis: An arrangement or program occurring on a routine schedule (i.e., occurring at least weekly or on some other schedule). Do not include occasional babysitting or "back up" arrangements that are just used once in a while.

YES..	1	
NO	2	(CCQ.120)
REFUSED	7	(CCQ.120)
DON'T KNOW	9	(CCQ.120)

CCQ.030   How many different **regular** care arrangements did you have with relatives for {CHILD}'s care during the summer?

CAPI INSTRUCTION: DISPLAY "regular" IN BRIGHT WHITE.

ONE	1
TWO	2
THREE	3
FOUR...	4
FIVE OR MORE..	5
REFUSED	7
DON'T KNOW	9

CCQ.040   {Let's talk about the relative who provided the most care for {CHILD} during the summer.} Who is the relative who cared for {CHILD}?

PROBE FOR RELATIONSHIP TO CHILD.

CAPI INSTRUCTION: DISPLAY "{Let's talk about the relative who provided the most care for {CHILD} during the summer.}" IF CCQ.030 = 2, 3, 4, 5, 7, OR 9. OTHERWISE, USE A NULL DISPLAY.

GRANDPARENT	1
AUNT	2
UNCLE	3
BROTHER...	4
SISTER	5
ANOTHER RELATIVE	6
REFUSED	7
DON'T KNOW	9

CCQ.050 Was the care provided by {{CHILD}'s {RELATIVE}/that relative} in your home or another home?

CAPI INSTRUCTION: DISPLAY "{CHILD}'S {RELATIVE}" IF CCQ.040 = 1, 2, 3, 4, OR 5. OTHERWISE, DISPLAY "THAT RELATIVE".

CAPI INSTRUCTION: FOR "{RELATIVE}", DISPLAY "GRANDPARENT IF CCQ.040 = 1; DISPLAY "AUNT" IF CCQ.040 = 2; DISPLAY "UNCLE" IF CCQ.040 = 3; DISPLAY "BROTHER" IF CCQ.040 = 4; DISPLAY "SISTER" IF CCQ.040 = 5.

```
                    OWN HOME/CHILD'S HOME ......................  1
                    OTHER HOME ...........................................  2
                    BOTH/VARIES............................................  3
                    REFUSED .................................................  7
                    DON'T KNOW ...........................................  9
```

HELP AVAILABLE

CCQ.055 Was the care that {CHILD} received from {his/her} {RELATIVE}/that relative} **regularly scheduled** at least once each week during the summer?

HELP TEXT:
Regularly Scheduled: Regularly scheduled at least once **each week** could mean every Wednesday, every Monday and Friday, everyday, or some other schedule, as long as it is at least once **each** week.

CAPI INSTRUCTION: DISPLAY "{his/her} {RELATIVE}" IF CCQ.040 = 1, 2, 3, 4, OR 5. OTHERWISE, DISPLAY "THAT RELATIVE".

CAPI INSTRUCTION: DISPLAY "regularly scheduled" IN BRIGHT WHITE.

CAPI INSTRUCTION: FOR "{RELATIVE}", DISPLAY "GRANDPARENT IF CCQ.040 = 1; DISPLAY "AUNT" IF CCQ.040 = 2; DISPLAY "UNCLE" IF CCQ.040 = 3; DISPLAY "BROTHER" IF CCQ.040 = 4; DISPLAY "SISTER" IF CCQ.040 = 5.

```
                    YES.............................................................  1
                    NO ..............................................................  2  (BOX 2)
                    REFUSED ...................................................  7  (BOX 2)
                    DON'T KNOW .............................................  9  (BOX 2)
```

CCQ.060 How many **days** each week did {CHILD} receive care from {{his/her} {RELATIVE}/that relative}?

CAPI INSTRUCTION: SOFT RANGE CHECK 1-5. HARD RANGE CHECK 1-7.

CAPI INSTRUCTION: DISPLAY "{his/her} {RELATIVE}" IF CCQ.040 = 1, 2, 3, 4, OR 5. OTHERWISE, DISPLAY "THAT RELATIVE".

CAPI INSTRUCTION: DISPLAY "days" IN BRIGHT WHITE.

CAPI INSTRUCTION: FOR "{RELATIVE}", DISPLAY "GRANDPARENT IF CCQ.040 = 1; DISPLAY "AUNT" IF CCQ.040 = 2; DISPLAY "UNCLE" IF CCQ.040 = 3; DISPLAY "BROTHER" IF CCQ.040 = 4; DISPLAY "SISTER" IF CCQ.040 = 5.

```
                    |___|___|
                    ENTER # OF DAYS
                       or
                    REFUSED ...................................................  77
                    DON'T KNOW .............................................  99
```

CCQ.070 How many **hours** each **week** did {CHILD} receive care from {{his/her} {RELATIVE}/that relative}?

HELP TEXT:
Record the hours each week in whole hours.

If the respondent reports daily hours, probe for weekly hours.

If the hours per week varied, ask for the number of hours in a typical week.

Include only the number of hours that the child received care when the parent was not at home.

CAPI INSTRUCTION: SOFT RANGE CHECK 1-50. HARD RANGE CHECK 1-70.

CAPI INSTRUCTION: DISPLAY "{his/her} {RELATIVE}" IF CCQ.040 = 1, 2, 3, 4, OR 5. OTHERWISE, DISPLAY "THAT RELATIVE".

CAPI INSTRUCTION: DISPLAY "hours" AND "week" IN BRIGHT WHITE.

CAPI INSTRUCTION: FOR "{RELATIVE}", DISPLAY "GRANDPARENT IF CCQ.040 = 1; DISPLAY "AUNT" IF CCQ.040 = 2; DISPLAY "UNCLE" IF CCQ.040 = 3; DISPLAY "BROTHER" IF CCQ.040 = 4; DISPLAY "SISTER" IF CCQ.040 = 5.

|___|___|
ENTER # OF HOURS
   or
REFUSED 77
DON'T KNOW 99

CCQ.075 How many **weeks** during the summer did {CHILD} receive care from this relative?

CAPI INSTRUCTION: DISPLAY "weeks" IN BRIGHT WHITE.

CAPI INSTRUCTION: HARD RANGE CHECK 1 - 16.

|___|___|
ENTER # OF WEEKS
   or
REFUSED 77
DON'T KNOW 99

BOX 2

- IF ONLY ONE CURRENT REGULAR RELATIVE CARE ARRANGEMENT FOR CHILD (CCQ.030 = 1, 7, OR 9), GO TO CCQ.120.
- OTHERWISE, CONTINUE WITH CCQ.110.

CCQ.110 You said that {CHILD} was cared for by {NUMBER} other relatives on a regular basis. How many **hours** each **week** does {CHILD} receive care from these other relatives?

CAPI INSTRUCTION: FOR "{NUMBER}", DISPLAY "1" IF CCQ.030 = 2; "2" IF CCQ.030 = 3; DISPLAY "3" IF CCQ.030 = 4.

CAPI INSTRUCTION: DISPLAY "hours" AND "week" IN BRIGHT WHITE.

CAPI INSTRUCTION: SOFT RANGE CHECK 1-50. HARD RANGE CHECK 1-70.

|___|___|
ENTER # OF HOURS
  or
REFUSED 77
DON'T KNOW 99

HELP AVAILABLE

CCQ.120 Now I'd like to ask you about any care {CHILD} received during the summer from **nonrelatives** in a private home, not including child care centers or summer camp. Did {CHILD} receive care in a private home on a **regular basis** during the summer from someone who is not related to {him/her}? This includes home child care providers, regular sitters or neighbors.

CAPI INSTRUCTION: DISPLAY "nonrelatives" AND "regular basis" IN BRIGHT WHITE.

HELP TEXT:
Care from a non-relative: Non-relative care is provided by someone not related to the child and is located in a private home. The private home may be the child's home, the caregiver's home, or another home.

If there is at least one parent in the household, any nonrelative living in the household is eligible to be counted as a care arrangement, IF the care is given on a regularly scheduled basis.

If neither parent lives in the household, do not include care provided by guardians who live with the child (they are treated the same as parents).

Non-relative care arrangements or programs may or may not have a charge or fee.

Regular Basis: An arrangement or program occurring on a routine schedule (i.e., occurring at least weekly or on some other schedule). Do not include occasional babysitting or "back up" arrangements that are just used once in a while.

YES.. 1
NO 2 (CCQ.220)
REFUSED 7 (CCQ.220)
DON'T KNOW 9 (CCQ.220)

CCQ.130 How many different **regular** care arrangements did you have with **nonrelatives** for {CHILD}'s care during the summer?

CAPI INSTRUCTION: DISPLAY "regular" AND "nonrelatives" IN BRIGHT WHITE.

ONE 1
TWO 2
THREE 3
FOUR... 4
FIVE OR MORE... 5
REFUSED 7
DON'T KNOW 9

CCQ.140   {Let's talk about the nonrelative who provided the most care for {CHILD} during the summer.} Was that care provided in your home or another home?

CAPI INSTRUCTION: DISPLAY "Let's talk about the nonrelative who provided the most care for {CHILD} during the summer.} IF CCQ.130 = 2, 3, 4, 7, OR 9. OTHERWISE, USE A NULL DISPLAY.

OWN HOME/CHILD'S HOME 1
OTHER HOME 2
BOTH/VARIES... 3
REFUSED 7
DON'T KNOW 9

HELP AVAILABLE

CCQ.150.   Was the care that {CHILD} received from that person **regularly scheduled** at least once each week during the summer?

HELP TEXT:
Regularly Scheduled: Regularly scheduled at least once **each week** could mean every Wednesday, every Monday and Friday, everyday, or some other schedule, as long as it is at least once **each** week.

CAPI INSTRUCTION: DISPLAY "regularly scheduled" IN BRIGHT WHITE.

YES... 1
NO 2   (BOX 3)
REFUSED 7   (BOX 3)
DON'T KNOW 9   (BOX 3)

CCQ.160   How many **days** each week did {CHILD} receive care from that person?

CAPI INSTRUCTION: DISPLAY "days" IN BRIGHT WHITE.

CAPI INSTRUCTION: SOFT RANGE CHECK 1-5. HARD RANGE CHECK 1-7.

|___|
ENTER # OF DAYS
    or
REFUSED 77
DON'T KNOW 99

HELP AVAILABLE

CCQ.170   How many **hours** each **week** did {CHILD} receive care from that person?

HELP TEXT:
Record the hours each week in whole hours.

If the respondent reports daily hours, probe for weekly hours.

If the hours per week varied, ask for the number of hours in a typical week.

Include only the number of hours that the child received care when the parent was not at home.

CAPI INSTRUCTION: DISPLAY "hours" AND "week" IN BRIGHT WHITE.

CAPI INSTRUCTION: SOFT RANGE CHECK 1-50. HARD RANGE CHECK 1-70.

|___|___|
ENTER # OF HOURS
    or
REFUSED 77
DON'T KNOW 99

CCQ.175   How many **weeks** did {CHILD} receive care from that person?

CAPI INSTRUCTION: DISPLAY "weeks" IN BRIGHT WHITE.

CAPI INSTRUCTION: HARD RANGE CHECK 1 - 16 WEEKS.

|___|___|
ENTER # OF WEEKS
  or
REFUSED 77
DON'T KNOW 99

BOX 3

- IF ONLY ONE CURRENT REGULAR NON-RELATIVE CARE ARRANGEMENT FOR CHILD (CCQ.130 = 1 OR 7 OR 9), GO TO CCQ.220.
- OTHERWISE, CONTINUE WITH CCQ.210.

CCQ.210   You said that {CHILD} was cared for by {NUMBER} other nonrelatives on a regular basis. How many **hours** each **week** did {CHILD} receive care from these nonrelatives?

CAPI INSTRUCTION: FOR "{NUMBER}", DISPLAY "1" IF CCQ.130 = 2; DISPLAY "2" IF CCQ.130 = 3; DISPLAY "3" IF CCQ.130 = 4.

CAPI INSTRUCTION: DISPLAY "hours" AND "week" IN BRIGHT WHITE.

CAPI INSTRUCTION: SOFT RANGE CHECK 1-50. HARD RANGE CHECK 1-70.

|___|___|
ENTER # OF HOURS
  or
REFUSED 77
DON'T KNOW 99

HELP AVAILABLE

CCQ.220   Did {CHILD} attend a day care center, including an extended day program, during the summer? Please do not include any programs that are called summer camp.

HELP TEXT:
Day Care Center: Includes any type of formal program that may have names like "Children's Academy," or "Early Learning Center."

DO NOT include Head Start. Also, do NOT include care provided in a private home.

Extended Day Program: Center-based program that provides care after or before day time hours.

YES.. 1
NO .... 2 (BOX 5)
REFUSED .... 7 (BOX 5)
DON'T KNOW .... 9 (BOX 5)

CCQ.225   How many different day care centers did {CHILD} attend on a **regular** basis during the summer?

CAPI INSTRUCTION: DISPLAY "regular" IN BRIGHT WHITE.

ONE	1
TWO	2
THREE	3
FOUR..	4
REFUSED	7
DON'T KNOW	9

HELP AVAILABLE

CCQ.230   {Let's talk about the day care center that {CHILD} spent the most time during the summer.} During the summer, did {CHILD} go to that program on a **regularly scheduled** basis at least once each week?

HELP TEXT:
Regularly Scheduled: Regularly scheduled at least once **each week** could mean every Wednesday, every Monday and Friday, everyday, or some other schedule, as long as it is at least once **each** week.

CAPI INSTRUCTION: DISPLAY {Let's talk about the day care center that {CHILD} spent the most time during the summer.} IF CCQ.225 = 2, 3, 4, 7, OR 9. OTHERWISE, USE A NULL DISPLAY.

CAPI INSTRUCTION: DISPLAY "regularly scheduled" IN BRIGHT WHITE.

YES...	1	
NO	2	(BOX 5)
REFUSED	7	(BOX 5)
DON'T KNOW	9	(BOX 5)

CCQ.240   How many **days** each week did {CHILD} go to that program during the summer?

CAPI INSTRUCTION: DISPLAY "days" IN BRIGHT WHITE.

CAPI INSTRUCTION: SOFT RANGE CHECK 1-5. HARD RANGE CHECK 1-7.

|___|
ENTER # OF DAYS
  or

REFUSED	77
DON'T KNOW	99

CCQ.250   How many **hours** each **week** did {CHILD} go to that program during the summer?

CAPI INSTRUCTION: DISPLAY "hours" AND "week" IN BRIGHT WHITE.

CAPI INSTRUCTION: SOFT RANGE CHECK 1-50. HARD RANGE CHECK 1-70.

|___|___|
ENTER # OF HOURS
  or

REFUSED	77
DON'T KNOW	99

CCQ.255   How many **weeks** did {CHILD} receive care from that program?

CAPI INSTRUCTION: DISPLAY "week" IN BRIGHT WHITE.

CAPI INSTRUCTION: HARD RANGE CHECK 1 - 16.

|___|___|
ENTER # OF WEEKS
   or
REFUSED 77
DON'T KNOW 99

BOX 4

■   IF ONLY ONE REGULAR DAY CARE CENTER OVER THE SUMMER
     (CCQ.225 = 1 OR 7 OR 9), GO TO BOX 5.
■   OTHERWISE, CONTINUE WITH CCQ.290.

CCQ.290   You said that {CHILD} attended {NUMBER} other day care centers on a regular basis. How may **hours**
           each **week** did {CHILD} receive care from these programs?

CAPI INSTRUCTION: FOR "{NUMBER}", DISPLAY "1" IF CCQ.225 = 2; DISPLAY "2" IF CCQ.225 =
3; DISPLAY "3" IF CCQ.225 = 4.

CAPI INSTRUCTION: DISPLAY "hours" AND "week" IN BRIGHT WHITE.

CAPI INSTRUCTION: SOFT RANGE CHECK 1-50. HARD RANGE CHECK 1-70.

|___|___|
ENTER # OF HOURS
   or
REFUSED 77
DON'T KNOW 99

BOX 5

■   GO TO SECTION NEQ (NEIGHBORHOOD QUESTIONS).

NEIGHBORHOOD QUESTIONS (*FALL FIRST GRADE*)-NEQ

BOX 1

IF NumberOfChildren = 2 AND ChildNum = 2, GO TO BOX 2.
OTHERWISE, CONTINUE WITH NEQ.020.

NEQ.020   Now, I have a few questions about your neighborhood. Please tell me if you have the following groups or places in your neighborhood or a nearby area which you consider convenient to your home. Please tell us whether you have these things, regardless of whether you use them or not. First, do you have….

		YES	NO	REFUSED	DON'T KNOW
a.	A recreation center or organized activities such as Little League or soccer?	1	2	7	9
b.	A community or neighborhood association?	1	2	7	9
c.	A community pool?	1	2	7	9
d.	A community park or playground area?	1	2	7	9
e.	A library or bookmobile?	1	2	7	9
f.	A boys' or girls' club?	1	2	7	9

BOX 2

■   GO TO SECTION CMQ (MOBILITY AND TRACKING UPDATES).

BOX 1

- IF NumberOfChildren = 1 OR IF NumberOfChildren = 2 AND ChildNum = 1, GO TO BOX 2.
- IF NumberOfChildren = 2 AND ChildNum = 2, GO TO BOX 8.

BOX 2

IF COOPERATING RESPONDENT:
- IF SPRING K CMQ.140 = 000, DK, OR RF OR
- IF SPRING K CMQ.060=2, DK, RF, OR
- IF SPRING K CMQ.100 = 2, DK, OR RF, CONTINUE WITH CMQ.060.
  OTHERWISE, GO TO CMQ.100.
IF PREVIOUS ROUND NON-RESPONDENT, CONTINUE WITH CMQ.060.

CMQ.060   Just to make sure I can reach you for the next interview, which will take place next spring. I'd like to ask a few questions about how to find you.

Is there a second phone number, such as a work number, a friend or relative's number, or a beeper or call phone number, where you can sometimes be reached?

YES	1	(CMQ.140)
NO	2	(BOX 3)
REFUSED	7	(BOX 3)
DON'T KNOW	9	(BOX 3)

CMQ.100   Just to make sure I can reach you for the next interview, which will take place next spring, I'd like to ask a few questions about how to find you.

I have recorded {PHONE NUMBER} as a second phone number where you can sometimes be reached? Is this the right number?

CAPI INSTRUCTION: IF CMQ.100 IN SPRING K=1, DISPLAY THIS SECOND PHONE NUMBER.

CAPI INSTRUCTION: IF ENTRY WAS MADE IN SPRING K CMQ.140, DISPLAY THIS AS THE SECOND PHONE NUMBER.

YES	1	(BOX 3)
NO	2	(CMQ.140)
REFUSED	7	(BOX 3)
DON'T KNOW	9	(BOX 3)

CMQ.140   What is that telephone number?

ENTER {NEW} SECOND PHONE NUMBER, INCLUDING AREA CODE/EXTENSION.

CAPI INSTRUCTION: DISPLAY 'NEW' IF CMQ.100=2. OTHERWISE, USE A NULL DISPLAY.

CAPI INSTRUCTION: ADD A SEPARATE FIELD FOR ENTERING TELEPHONE EXTENSION.

CAPI INSTRUCTION: IF THE PHONE NUMBER FIELD HAS ENTRIES, THE CURSOR SHOULD MOVE TO THE EXTENSION FIELD

CAPI INSTRUCTION: ALLOW 10 SPACES FOR THE EXTENSION FIELD.

CAPI INSTRUCTION: EMPTY IS ALLOWED AT THE EXTENSION FIELD.

CAPI INSTRUCTION: WHEN THE CURSOR IS AT THE EXTENSION FIELD, DISPLAY THE INTERVIEWER INSTRUCTION: 'ENTER EXTENSION.'

CAPI INSTRUCTION: IF DK OR RF AT THE PHONE NUMBER FIELD, THE CURSOR SHOULD SKIP THE EXTENSION FIELD AND MOVE TO THE NEXT ITEM.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

        |__|__|__| − |__|__|__| −|__|__|__|__| _____
              SECOND TELEPHONE NUMBER   EXTENSION

CMQ.150   Where is that telephone located?

OFFICE/PLACE OF BUSINESS	1	(BOX 3)
RELATIVE (SPECIFY) _____	2	(CMQ.155)
NEIGHBOR (SPECIFY) _____	3	(CMQ.155)
FRIEND (SPECIFY) _____	4	(CMQ.155)
BEEPER NUMBER	5	(BOX 3)
CELL PHONE	6	(BOX 3)
OTHER (SPECIFY) _____	7	(CMQ.155)
REFUSED	77	(BOX 3)
DON'T KNOW	99	(BOX 3)

CMQ.155   [Where is that telephone located?]

SPECIFY {RELATIVE / NEIGHBOR / FRIEND / OTHER}.

CAPI INSTRUCTIONS:

1.   DISPLAY 'RELATIVE' IF CMQ.150=2.

2.   DISPLAY 'NEIGHBOR' IF CMQ.150=3.

3.   DISPLAY 'FRIEND' IF CMQ.150=4.

4.   DISPLAY 'OTHER' IF CMQ.150 = 7.

```
                              BOX 3

IF COOPERATING RESPONDENT:
■  IF CMQ.200 IN SPRING K=1 OR 2, OR CMQ.205 IN SPRING K=1 GO TO
     CMQ.200.
■  OTHERWISE, GO TO CMQ.205.
IF PREVIOUS ROUND NON-RESPONDENT, GO TO CMQ.205.
```

CMQ.200   I have recorded that {NAME OF RELATIVE/FRIEND} at {PHONE NUMBER} on

                        {STREET ADDRESS, LINE 1}
                        {STREET ADDRESS, LINE 2}
                        {CITY}, {STATE} {ZIP CODE}

           will always know where you are if you move. Is this still true?

           IF NECESSARY SAY: I will only contact this person if I cannot locate you for the next interview.

           CAPI INSTRUCTION: IF CMQ.200 IN SPRING K=1, DISPLAY THIS INFORMATION. IF CMQ.210 –
               CMQ.280 HAVE ENTRIES, DISPLAY THIS INFORMATION

           CAPI INSTRUCTION: DK AND RF FROM RND 2 OR RND 1 (IF NO RND 2 DATA) MUST SHOW UP
               AS PART OF THE ITEM TEXT AS "REFUSED", "REF", "DK", OR "DON'T KNOW".

                        YES, NO CORRECTION NEEDED .... 1 (BOX 4)
                        YES, MINOR CORRECTIONS NEEDED 2 (CMQ.210)
                        NO 3 (CMQ.205)
                        REFUSED .... 7 (BOX 4)
                        DON'T KNOW .... 9 (BOX 4)

CMQ.205   Is there a relative or friend, who does not live in this household, who will always know where you are if
           you move?

           IF NECESSARY SAY: I will only contact this person if I cannot locate you for the next interview.

                        YES 1 (CMQ.210)
                        NO .... 2 (BOX 4)
                        REFUSED .... 7 (BOX 4)
                        DON'T KNOW .... 9 (BOX 4)

CMQ.210   What is the name, address, and telephone number of that person?

           {ENTER / CORRECT / ENTER NEW} FIRST AND LAST NAME.

           {IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

           CAPI INSTRUCTIONS: IF SPRING K CMQ.200=2, DISPLAY THE OLD INFORMATION FROM
           SPRING K CMQ.210-280 IN THE RESPONSE FIELDS.

           CAPI INSTRUCTIONS: IF CMQ.200=2, DISPLAY 'CORRECT'. IF CMQ.200=3, DISPLAY 'ENTER
           NEW'.
           OTHERWISE, DISPLAY 'ENTER'.

CAPI INSTRUCTIONS: IF CMQ.200=2, DISPLAY 'IF FIELD…INFORMATION.'
OTHERWISE, USE A NULL DISPLAY.

CMQ.220   [What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} STREET ADDRESS, LINE 1.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

CAPI INSTRUCTIONS: IF SPRING K CMQ.200=2, DISPLAY THE OLD INFORMATION FROM
SPRING K CMQ.210-280 IN THE RESPONSE FIELDS.

CAPI INSTRUCTIONS: IF CMQ.200=2, DISPLAY 'CORRECT'. IF CMQ.200=3, DISPLAY 'ENTER
NEW'.
OTHERWISE, DISPLAY 'ENTER'.'

CAPI INSTRUCTIONS: IF CMQ.200=2, DISPLAY 'IF FIELD…INFORMATION'.
OTHERWISE, USE A NULL DISPLAY.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.230   [What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} STREET ADDRESS, LINE 2.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

CAPI INSTRUCTIONS: IF SPRING K CMQ.200=2, DISPLAY THE OLD INFORMATION FROM
SPRING K CMQ.210-280 IN THE RESPONSE FIELDS.

CAPI INSTRUCTIONS: IF CMQ.200=2, DISPLAY 'CORRECT'. IF CMQ.200=3, DISPLAY 'ENTER
NEW'.
OTHERWISE, DISPLAY 'ENTER'.'

CAPI INSTRUCTIONS: IF CMQ.200=2, DISPLAY 'IF FIELD…INFORMATION'.
OTHERWISE, USE A NULL DISPLAY.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.240   [What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} CITY.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

CAPI INSTRUCTIONS: IF SPRING K CMQ.200=2, DISPLAY THE OLD INFORMATION FROM
SPRING K CMQ.210-280 IN THE RESPONSE FIELDS.

CAPI INSTRUCTIONS: IF CMQ.200=2, DISPLAY 'CORRECT'. IF CMQ.200=3, DISPLAY 'ENTER
NEW'.
OTHERWISE, DISPLAY 'ENTER'.'

CAPI INSTRUCTIONS: IF CMQ.200=2, DISPLAY 'IF FIELD…INFORMATION'.
OTHERWISE, USE A NULL DISPLAY.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

[What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} STATE.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

DISPLAY STATE ABBREVIATIONS.

CAPI INSTRUCTIONS: IF SPRING K CMQ.200=2, DISPLAY THE OLD INFORMATION FROM SPRING K CMQ.210-280 IN THE RESPONSE FIELDS.

CAPI INSTRUCTIONS: IF CMQ.200=2, DISPLAY 'CORRECT'. IF CMQ.200=3, DISPLAY 'ENTER NEW'.
OTHERWISE, DISPLAY 'ENTER'.'

CAPI INSTRUCTIONS: IF CMQ.200=2, DISPLAY 'IF FIELD…INFORMATION'.
OTHERWISE, USE A NULL DISPLAY.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.260   [What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} ZIP CODE.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

CAPI INSTRUCTIONS: IF SPRING K CMQ.200=2, DISPLAY THE OLD INFORMATION FROM SPRING K CMQ.210-280 IN THE RESPONSE FIELDS.

CAPI INSTRUCTIONS: IF CMQ.200=2, DISPLAY 'CORRECT'. IF CMQ.200=3, DISPLAY 'ENTER NEW'.
OTHERWISE, DISPLAY 'ENTER'.'

CAPI INSTRUCTIONS: IF CMQ.200=2, DISPLAY 'IF FIELD…INFORMATION'.
OTHERWISE, USE A NULL DISPLAY.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.270   [What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} PHONE NUMBER, INCLUDING AREA CODE/EXTENSION.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

CAPI INSTRUCTIONS: IF SPRING K CMQ.200=2, DISPLAY THE OLD INFORMATION FROM SPRING K CMQ.210-280 IN THE RESPONSE FIELDS.

CAPI INSTRUCTIONS: IF CMQ.200=2, DISPLAY 'CORRECT'. IF CMQ.200=3, DISPLAY 'ENTER NEW'.
OTHERWISE, DISPLAY 'ENTER'.'

CAPI INSTRUCTIONS: IF CMQ.200=2, DISPLAY 'IF FIELD…INFORMATION'.
OTHERWISE, USE A NULL DISPLAY.

CAPI INSTRUCTION: ADD A SEPARATE RESPONSE FIELD FOR ENTERING TELEPHONE EXTENSION.

CAPI INSTRUCTION: IF THE PHONE NUMBER FIELD HAS ENTRIES, THE CURSOR SHOULD MOVE TO THE EXTENSION FIELD

CAPI INSTRUCTION: ALLOW 10 SPACES FOR THE EXTENSION FIELD.

CAPI INSTRUCTION: EMPTY IS ALLOWED AT THE EXTENSION FIELD.

CAPI INSTRUCTION: WHEN THE CURSOR IS AT THE EXTENSION FIELD, DISPLAY THE INTERVIEWER INSTRUCTION: 'ENTER EXTENSION.'

CAPI INSTRUCTION: IF DK OR RF AT THE PHONE NUMBER FIELD, THE CURSOR SHOULD SKIP THE EXTENSION FIELD AND MOVE TO THE NEXT ITEM.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.280   [What is the name, address, and telephone number of that person?]

PROBE: What is the person's relationship to you?

{ENTER / CORRECT / ENTER NEW} RELATIONSHIP OF PERSON TO RESPONDENT.

CAPI INSTRUCTIONS: IF SPRING K CMQ.200=2, DISPLAY THE OLD INFORMATION FROM SPRING K CMQ.210-280 IN THE RESPONSE FIELDS.

CAPI INSTRUCTIONS: IF CMQ.200=2, DISPLAY 'CORRECT'. IF CMQ.200=3, DISPLAY 'ENTER NEW'.
OTHERWISE, DISPLAY 'ENTER'.'

CAPI INSTRUCTIONS: IF CMQ.200=2, DISPLAY 'IF FIELD…INFORMATION'.
OTHERWISE, USE A NULL DISPLAY.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

```
                              BOX 4

IF COOPERATING RESPONDENT:
■  IF CMQ.300=1 OR 2 IN SPRING K, OR CMQ.305=1 IN SPRING K GO TO
       CMQ.300.
■  OTHERWISE, GO TO BOX 5.
IF PREVIOUS ROUND NON-RESPONDENT:
■  IF CMQ.205=2, DK, RF, GO TO BOX 6.
■  OTHERWISE, GO TO CMQ.305.
```

CMQ.300   I have also recorded that {NAME OF RELATIVE/FRIEND} at {PHONE NUMBER} on

                         {STREET ADDRESS, LINE 1}
                         {STREET ADDRESS, LINE 2}
                         {CITY}, {STATE} {ZIP CODE}

will always know how where you are if you move. Is this still true?

IF NECESSARY SAY: I will only contact this person if I cannot locate you for the next interview.

CAPI INSTRUCTION: IF CMQ.300=1 IN SPRING K, DISPLAY THIS INFORMATION. IF CMQ.310–380 HAVE ENTRIES, DISPLAY THIS INFORMATION.

CAPI INSTRUCTION: DK AND RF FROM RND 2 OR RND (IF NO RND 2 DATA) MUST SHOW UP AS PART OF THE ITEM TEXT AS "REFUSED", "REF", "DK", OR "DON'T KNOW".

YES, NO CORRECTION NEEDED .... 1 (BOX 6)
YES, MINOR CORRECTIONS NEEDED 2 (CMQ.310)
NO .... 3 (BOX 5)
REFUSED .... 7 (BOX 5)
DON'T KNOW .... 9 (BOX 5)

```
┌─────────────────────────────────────────────────────────────────┐
│                              BOX 5                                │
│                                                                   │
│  ■ IF CMQ.205=2, DK, RF, GO TO BOX 6.                             │
│                                                                   │
│  ■ IF CMQ.205 WAS NOT ASKED, CONTINUE WITH CMQ.305.               │
└─────────────────────────────────────────────────────────────────┘
```

CMQ.305   Besides {PERSON AT CMQ.210}, is there another relative or friend, who does not live in this household, who will always know where you are if you move?

IF NECESSARY SAY: I will only contact this person if I cannot locate you for the next interview.

YES 1 (CMQ.310)
NO .... 2 (BOX 6)
REFUSED .... 7 (BOX 6)
DON'T KNOW .... 9 (BOX 6)

CMQ.310   What is the name, address, and telephone number of that person?

{ENTER / CORRECT / ENTER NEW} FIRST AND LAST NAME.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

CAPI INSTRUCTION: IF SPRING K CMQ.300=2, DISPLAY THE OLD INFORMATION FROM SPRING K CMQ.310-380 IN THE RESPONSE FIELDS.

CAPI INSTRUCTION: IF CMQ.300=2, DISPLAY 'CORRECT'.
CAPI INSTRUCTION: IF CMQ.300=3, DISPLAY 'ENTER NEW'.
OTHERWISE, DISPLAY 'ENTER.'

CAPI INSTRUCTION: IF CMQ.300=2, DISPLAY 'IF FIELD…INFORMATION'.
OTHERWISE, USE A NULL DISPLAY.

CMQ.320   [What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} STREET ADDRESS, LINE 1.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

CAPI INSTRUCTION: IF SPRING K CMQ.300=2, DISPLAY THE OLD INFORMATION FROM SPRING K CMQ.310-380 IN THE RESPONSE FIELDS.

CAPI INSTRUCTION: IF CMQ.300=2, DISPLAY 'CORRECT'.
CAPI INSTRUCTION: IF CMQ.300=3, DISPLAY 'ENTER NEW'.
OTHERWISE, DISPLAY 'ENTER.'

CAPI INSTRUCTION: IF CMQ.300=2, DISPLAY 'IF FIELD…INFORMATION'.
OTHERWISE, USE A NULL DISPLAY.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.330   [What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} STREET ADDRESS, LINE 2.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

CAPI INSTRUCTION: IF SPRING K CMQ.300=2, DISPLAY THE OLD INFORMATION FROM
SPRING K CMQ.310-380 IN THE RESPONSE FIELDS.

CAPI INSTRUCTION: IF CMQ.300=2, DISPLAY 'CORRECT'.
CAPI INSTRUCTION: IF CMQ.300=3, DISPLAY 'ENTER NEW'.
OTHERWISE, DISPLAY 'ENTER.'

CAPI INSTRUCTION: IF CMQ.300=2, DISPLAY 'IF FIELD…INFORMATION'.
OTHERWISE, USE A NULL DISPLAY.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.340   [What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} CITY.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

CAPI INSTRUCTION: IF SPRING K CMQ.300=2, DISPLAY THE OLD INFORMATION FROM
SPRING K CMQ.310-380 IN THE RESPONSE FIELDS.

CAPI INSTRUCTION: IF CMQ.300=2, DISPLAY 'CORRECT'.
CAPI INSTRUCTION: IF CMQ.300=3, DISPLAY 'ENTER NEW'.
OTHERWISE, DISPLAY 'ENTER.'

CAPI INSTRUCTION: IF CMQ.300=2, DISPLAY 'IF FIELD…INFORMATION'.
OTHERWISE, USE A NULL DISPLAY.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.350   **HELP AVAILABLE**

[What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} STATE.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

DISPLAY STATE ABBREVIATIONS.

CAPI INSTRUCTION: IF SPRING K CMQ.300=2, DISPLAY THE OLD INFORMATION FROM
SPRING K CMQ.310-380 IN THE RESPONSE FIELDS.

CAPI INSTRUCTION: IF CMQ.300=2, DISPLAY 'CORRECT'.
CAPI INSTRUCTION: IF CMQ.300=3, DISPLAY 'ENTER NEW'.

OTHERWISE, DISPLAY 'ENTER.'

CAPI INSTRUCTION: IF CMQ.300=2, DISPLAY 'IF FIELD…INFORMATION'.
OTHERWISE, USE A NULL DISPLAY.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.360 [What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} ZIP CODE.

{IF FIELD IS INCOMPLETE, ENTER NEW INFORMATION.}

CAPI INSTRUCTION: IF SPRING K CMQ.300=2, DISPLAY THE OLD INFORMATION FROM
SPRING K CMQ.310-380 IN THE RESPONSE FIELDS.

CAPI INSTRUCTION: IF CMQ.300=2, DISPLAY 'CORRECT'.
CAPI INSTRUCTION: IF CMQ.300=3, DISPLAY 'ENTER NEW'.
OTHERWISE, DISPLAY 'ENTER.'

CAPI INSTRUCTION: IF CMQ.300=2, DISPLAY 'IF FIELD…INFORMATION'.
OTHERWISE, USE A NULL DISPLAY.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.370 [What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} PHONE NUMBER, INCLUDING AREA CODE/EXTENSION.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

CAPI INSTRUCTION: IF SPRING K CMQ.300=2, DISPLAY THE OLD INFORMATION FROM
SPRING K CMQ.310-380 IN THE RESPONSE FIELDS.

CAPI INSTRUCTION: IF CMQ.300=2, DISPLAY 'CORRECT'.
CAPI INSTRUCTION: IF CMQ.300=3, DISPLAY 'ENTER NEW'.
OTHERWISE, DISPLAY 'ENTER.'

CAPI INSTRUCTION: IF CMQ.300=2, DISPLAY 'IF FIELD…INFORMATION'.
OTHERWISE, USE A NULL DISPLAY.

CAPI INSTRUCTION: ADD A SEPARATE RESPONSE FIELD FOR ENTERING TELEPHONE
EXTENSION.

CAPI INSTRUCTION: IF THE PHONE NUMBER FIELD HAS ENTRIES, THE CURSOR SHOULD
MOVE TO THE EXTENSION FIELD

CAPI INSTRUCTION: ALLOW 10 SPACES FOR THE EXTENSION FIELD.

CAPI INSTRUCTION: EMPTY IS ALLOWED AT THE EXTENSION FIELD.

CAPI INSTRUCTION: WHEN THE CURSOR IS AT THE EXTENSION FIELD, DISPLAY THE
INTERVIEWER INSTRUCTION: 'ENTER EXTENSION.'

CAPI INSTRUCTION: IF DK OR RF AT THE PHONE NUMBER FIELD, THE CURSOR SHOULD SKIP
THE EXTENSION FIELD AND MOVE TO THE NEXT ITEM.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.380   [What is the name, address, and telephone number of that person?]

PROBE: What is the person's relationship to you?

{ENTER / CORRECT / ENTER NEW} RELATIONSHIP OF PERSON TO RESPONDENT.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

CAPI INSTRUCTION: IF SPRING K CMQ.300=2, DISPLAY THE OLD INFORMATION FROM SPRING K CMQ.310-380 IN THE RESPONSE FIELDS.

CAPI INSTRUCTION: IF CMQ.300=2, DISPLAY 'CORRECT'.
CAPI INSTRUCTION: IF CMQ.300=3, DISPLAY 'ENTER NEW'.
OTHERWISE, DISPLAY 'ENTER.'

CAPI INSTRUCTION: IF CMQ.300=2, DISPLAY 'IF FIELD…INFORMATION'.
OTHERWISE, USE A NULL DISPLAY.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

BOX 6

IF COOPERATING RESPONDENT:
- IF SPRING K CMQ.395=1 OR 2 OR SPRING K CMQ.400–470 HAVE ENTRIES, CONTINUE WITH CMQ.395.
- OTHERWISE, GO TO BOX 7.
IF PREVIOUS ROUND NON-RESPONDENT. GO TO BOX 7.

CMQ.395   I have recorded {NAME OF NONRESIDENTIAL PARENT} at {PHONE NUMBER} on

                            {STREET ADDRESS, LINE 1}
                            {STREET ADDRESS, LINE 2}
                            {CITY}, {STATE} {ZIP CODE}

is {CHILD}'s {RELATIONSHIP AT CMQ.170}.

Is this information still correct?

IF NECESSARY SAY: I will only contact this person if I cannot locate you for the next interview.

CAPI INSTRUCTION: IF CMQ.395=1 IN SPRING K, DISPLAY THIS INFORMATION. IF CMQ.400–470 HAVE ENTRIES DISPLAY THIS INFORMATION

CAPI INSTRUCTION: DK AND RF FROM RND 2 MUST SHOW UP AS PART OF THE ITEM TEXT AS "REFUSED", "REF", "DK", OR "DON'T' KNOW".

                    YES, NO CORRECTION NEEDED 1 (CMQ.500)
                    YES, MINOR CORRECTIONS NEEDED 2 (CMQ.400)
                    NO .... 3 (BOX 7)
                    INFORMATION ALREADY PROVIDED IN
                    PREVIOUS ITEMS 4 (CMQ.500)
                    REFUSED 7 (CMQ.500)
                    DON'T KNOW 9 (CMQ.500)

BOX 7

IF COOPERATING RESPONDENT:

- IF CMQ.395 WAS NOT ASKED AND IF FOCAL CHILD HAS AT LEAST ONE NON-RESIDENTIAL PARENT WHO THE CHILD HAS HAD CONTACT WITH (SPRING K NRQ100=1 OR 2 FOR AT LEAST ONE NON-RESIDENTIAL PARENT), CONTINUE WITH CMQ.400.
- IF CMQ.395=3 (NO) AND THE FOCAL CHILD HAS AT LEAST 2 NON-RESIDENT PARENT WHO THE CHILD HAS HAD CONTACT WITH (SPRING K NRQ.100=1 OR 2 FOR TWO-NON-RESIDENT PARENTS), ALSO CONTINUE WITH CMQ.400.

- OTHERWISE, GO TO CMQ.500.

IF PREVIOUS ROUND NON-RESPONDENT:

- IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.140 (BIOLOGICAL MOTHER) OR FSQ.150 (BIOLOGICAL FATHER) OR '2' AT FSQ.140 (ADOPTIVE MOTHER) OR FSQ.150 (ADOPTIVE FATHER), CONTINUE WITH CMQ.400.
- OTHERWISE, GO TO CMQ.500.

CMQ.400 What is the name, address, and telephone number of {CHILD}'s {biological mother/ {or} biological father / {or} adoptive mother / {or} adoptive father}?

IF NECESSARY SAY: I will only contact this person if I cannot locate you for the next interview.

ENTER FIRST AND LAST NAME.

HELP TEXT:

If the parent is deceased, or there has been no contact since birth/adoption, or there is no adoptive mother/father, then code '8.'

CAPI INSTRUCTIONS:

1.   BASE YEAR RESPONDENT:

   a.   DISPLAY 'BIOLOGICAL MOTHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER.

   b.   DISPLAY '{OR} BIOLOGICAL FATHER] IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL FATHER.

   DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER ALSO.

   c.   DISPLAY '{OR} ADOPTIVE MOTHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT ADOPTIVE MOTHER.

   DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

   d.   DISPLAY '{OR} ADOPTIVE FATHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT ADOPTIVE FATHER.

DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

2.   NEW RESPONDENT:

    a.   DISPLAY 'BIOLOGICAL MOTHER' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.140.

    b.   DISPLAY '{OR} BIOLOGICAL FATHER' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.150.

        DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.150 ALSO.

    c.   DISPLAY '{OR} ADOPTIVE MOTHER' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.140.

        DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150 ALSO.

    d.   DISPLAY '{OR} ADOPTIVE FATHER' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150.

        DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150 ALSO.

3.   IF CODED '8' GO TO CMQ.500.

CMQ.410   [What is the name, address, and telephone number of {CHILD}'s {biological mother/ {or} biological father / {or} adoptive mother / {or} adoptive father}?]

ENTER STREET ADDRESS, LINE 1.

CAPI INSTRUCTIONS:

1.   BASE YEAR RESPONDENT:

    a.   DISPLAY 'BIOLOGICAL MOTHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER.

    b.   DISPLAY '{OR} BIOLOGICAL FATHER] IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL FATHER.

        DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER ALSO.

    c.   DISPLAY '{OR} ADOPTIVE MOTHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT ADOPTIVE MOTHER.

        DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

    d.   DISPLAY '{OR} ADOPTIVE FATHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT ADOPTIVE FATHER.

        DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO, OR IF FALL K NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR FATHER ALSO CIF NO SPRING K DATA).

2. NEW RESPONDENT:

    a. DISPLAY 'BIOLOGICAL MOTHER' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.140.

    b. DISPLAY '{OR} BIOLOGICAL FATHER' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.150.

       DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.150 ALSO.

    c. DISPLAY '{OR} ADOPTIVE MOTHER' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.140.

       DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150 ALSO.

    d. DISPLAY '{OR} ADOPTIVE FATHER' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150.

       DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150 ALSO.

CMQ.420   [What is the name, address, and telephone number of {CHILD}'s {biological mother/ {or} biological father / {or} adoptive mother / {or} adoptive father}?]

ENTER STREET ADDRESS, LINE 2.

CAPI INSTRUCTIONS:

1. BASE YEAR RESPONDENT:

    a. DISPLAY 'BIOLOGICAL MOTHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER.

    b. DISPLAY '{OR} BIOLOGICAL FATHER] IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL FATHER

       DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER ALSO.

    c. DISPLAY '{OR} ADOPTIVE MOTHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT ADOPTIVE MOTHER.

       DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO, OR IF FALL K NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR FATHER ALSO CIF NO SPRING K DATA).

    d. DISPLAY '{OR} ADOPTIVE FATHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT ADOPTIVE FATHER.

       DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

2   NEW RESPONDENT:

    a. DISPLAY 'BIOLOGICAL MOTHER' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.140.

b. DISPLAY '{OR} BIOLOGICAL FATHER' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.150.

DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.150 ALSO.

c. DISPLAY '{OR} ADOPTIVE MOTHER' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.140.

DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150 ALSO.

d. DISPLAY '{OR} ADOPTIVE FATHER' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150.

DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150 ALSO.

CMQ.430 [What is the name, address, and telephone number of {CHILD}'s {biological mother/ {or} biological father / {or} adoptive mother / {or} adoptive father}?]

ENTER CITY.

CAPI INSTRUCTIONS:

1. BASE YEAR RESPONDENT:

a. DISPLAY 'BIOLOGICAL MOTHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER.

b. DISPLAY '{OR} BIOLOGICAL FATHER] IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL FATHER.

DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER ALSO.

c. DISPLAY '{OR} ADOPTIVE MOTHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT ADOPTIVE MOTHER.

DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO

d. DISPLAY '{OR} ADOPTIVE FATHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT ADOPTIVE FATHER.

DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

2. NEW RESPONDENT:

a. DISPLAY 'BIOLOGICAL MOTHER' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.140.

b. DISPLAY '{OR} BIOLOGICAL FATHER' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.150.

DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.150 ALSO.

c. DISPLAY '{OR} ADOPTIVE MOTHER' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.140.

DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150 ALSO.

d. DISPLAY '{OR} ADOPTIVE FATHER' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150.

DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150 ALSO.

CMQ.440   **HELP AVAILABLE**

[What is the name, address, and telephone number of {CHILD}'s {biological mother/ {or} biological father / {or} adoptive mother / {or} adoptive father}?]

ENTER STATE.

CAPI INSTRUCTIONS:

1. BASE YEAR RESPONDENT:

    a. DISPLAY 'BIOLOGICAL MOTHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER.

    b. DISPLAY '{OR} BIOLOGICAL FATHER] IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL FATHER.

        DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER ALSO.

    c. DISPLAY '{OR} ADOPTIVE MOTHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT ADOPTIVE MOTHER.

        DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

    d. DISPLAY '{OR} ADOPTIVE FATHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT ADOPTIVE FATHER.

        DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

2. NEW RESPONDENT:

    a. DISPLAY 'BIOLOGICAL MOTHER' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.140.

    b. DISPLAY '{OR} BIOLOGICAL FATHER' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.150.

        DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.150 ALSO.

    c. DISPLAY '{OR} ADOPTIVE MOTHER' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.140.

    d. DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150 ALSO.

    e. DISPLAY '{OR} ADOPTIVE FATHER' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150.

        DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150 ALSO.

CMQ.450   [What is the name, address, and telephone number of {CHILD}'s {biological mother/ {or} biological father / {or} adoptive mother / {or} adoptive father}?]

ENTER ZIP CODE.

CAPI INSTRUCTIONS:

1.   BASE YEAR RESPONDENT:

     a.   DISPLAY 'BIOLOGICAL MOTHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER.

     b.   DISPLAY '{OR} BIOLOGICAL FATHER] IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL FATHER.

         DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER ALSO,.

     c.   DISPLAY '{OR} ADOPTIVE MOTHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT ADOPTIVE MOTHER.

         DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

     d.   DISPLAY '{OR} ADOPTIVE FATHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT ADOPTIVE FATHER.

         DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

2.   NEW RESPONDENT:

     a.   DISPLAY 'BIOLOGICAL MOTHER' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.140.

     b.   DISPLAY '{OR} BIOLOGICAL FATHER' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.150.

         DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.150 ALSO.

     c.   DISPLAY '{OR} ADOPTIVE MOTHER' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.140.

         DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150 ALSO.

     d.   DISPLAY '{OR} ADOPTIVE FATHER' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150.

         DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150 ALSO.

CMQ.460 [What is the name, address, and telephone number of {CHILD}'s {biological mother/ {or} biological father / {or} adoptive mother / {or} adoptive father}?]

ENTER PHONE NUMBER, INCLUDING AREA CODE/EXTENSION.

CAPI INSTRUCTIONS:

1. BASE YEAR RESPONDENT:

a. DISPLAY 'BIOLOGICAL MOTHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER.

b. DISPLAY '{OR} BIOLOGICAL FATHER] IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL FATHER.

DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER ALSO, OR IF FALL K NRQ.040 = 1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER ALSO (IF NO SPRING K DATA).

c. DISPLAY '{OR} ADOPTIVE MOTHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT ADOPTIVE MOTHER.

DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

d. DISPLAY '{OR} ADOPTIVE FATHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT ADOPTIVE FATHER.

DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

2. NEW RESPONDENT:

a. DISPLAY 'BIOLOGICAL MOTHER' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.140.

b. DISPLAY '{OR} BIOLOGICAL FATHER' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.150.

DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.150 ALSO.

c. DISPLAY '{OR} ADOPTIVE MOTHER' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.140.

DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150 ALSO.

d. DISPLAY '{OR} ADOPTIVE FATHER' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150.

DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150 ALSO.

3. CAPI INSTRUCTIONS:

CAPI INSTRUCTION: IF THE PHONE NUMBER FIELD HAS ENTRIES, THE CURSOR SHOULD MOVE TO THE EXTENSION FIELD

CAPI INSTRUCTION: ALLOW 10 SPACES FOR THE EXTENSION FIELD.

CAPI INSTRUCTION: EMPTY IS ALLOWED AT THE EXTENSION FIELD.

CAPI INSTRUCTION: WHEN THE CURSOR IS AT THE EXTENSION FIELD, DISPLAY THE INTERVIEWER INSTRUCTION: 'ENTER EXTENSION.'

CAPI INSTRUCTION: IF DK OR RF AT THE PHONE NUMBER FIELD, THE CURSOR SHOULD SKIP THE EXTENSION FIELD AND MOVE TO THE NEXT ITEM.

CMQ.470   [What is the name, address, and telephone number of {CHILD}'s {biological mother/ {or} biological father / {or} adoptive mother / {or} adoptive father}?]

PROBE: What is the person's relationship to {CHILD}?

ENTER RELATIONSHIP OF PERSON TO CHILD.

CAPI INSTRUCTIONS:

1.   BASE YEAR RESPONDENT:

   a.   DISPLAY 'BIOLOGICAL MOTHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER.

   b.   DISPLAY '{OR} BIOLOGICAL FATHER] IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL FATHER.

        DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER ALSO.

   c.   DISPLAY '{OR} ADOPTIVE MOTHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT ADOPTIVE MOTHER.

        DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

   d.   DISPLAY '{OR} ADOPTIVE FATHER' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT ADOPTIVE FATHER.

        DISPLAY THE 'OR' IF SPRING K NRQ100=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

2.   PREVIOUS ROUND NON-RESPONDENT:

   a.   DISPLAY 'BIOLOGICAL MOTHER' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.140.

   b.   DISPLAY '{OR} BIOLOGICAL FATHER' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.150.

        DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '1' AT FSQ.150 ALSO.

   c.   DISPLAY '{OR} ADOPTIVE MOTHER' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.140.

        DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150 ALSO.

   d.   DISPLAY '{OR} ADOPTIVE FATHER' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150.

        DISPLAY 'OR' IF NO HOUSEHOLD MEMBER CODED '2' AT FSQ.150 ALSO.

CMQ.500   Are you, or is someone else, planning to move to a new home with {CHILD} before {NEXT ROUND}?

                                    YES 1 (CMQ.510)
                                    NO .... 2 (BOX 8)
                                    REFUSED .... 7 (BOX 8)
                                    DON'T KNOW .... 9 (BOX 8)

CMQ.510   What is address and telephone number where {CHILD} will move?

                ENTER STREET ADDRESS, LINE 1.

                CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.520   [What is address and telephone number where {CHILD}'s will move?]

                ENTER STREET ADDRESS, LINE 2.

                CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.530   [What is address and telephone number where {CHILD} will move?]

                ENTER CITY.

                CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.540   **HELP AVAILABLE**

                [What is address and telephone number where {CHILD} will move?]

                ENTER STATE.

                CAPI INSTRUCTION: DISPLAY STATE ABBREVIATIONS IN F1 HELP TEXT.

                CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.550   [What is address and telephone number where {CHILD} will move?]

                ENTER ZIP CODE.

                CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.560   [What is address and telephone number where {CHILD} will move?]

                ENTER PHONE NUMBER, INCLUDING AREA CODE/EXTENSION.

                CAPI INSTRUCTION: ADD A SEPARATE RESPONSE FIELD FOR ENTERING TELEPHONE
                NUMBER.

                CAPI INSTRUCTION: IF THE PHONE NUMBER FIELD HAS ENTRIES, THE CURSOR SHOULD
                MOVE TO THE EXTENSION FIELD

                CAPI INSTRUCTION: ALLOW 10 SPACES FOR THE EXTENSION FIELD.

CAPI INSTRUCTION: EMPTY IS ALLOWED AT THE EXTENSION FIELD.

CAPI INSTRUCTION: WHEN THE CURSOR IS AT THE EXTENSION FIELD, DISPLAY THE INTERVIEWER INSTRUCTION: 'ENTER EXTENSION.'

CAPI INSTRUCTION: IF DK OR RF AT THE PHONE NUMBER FIELD, THE CURSOR SHOULD SKIP THE EXTENSION FIELD AND MOVE TO THE NEXT ITEM.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.570   CODE IF OBVIOUS. OTHERWISE, ASK: Will {CHILD} move . . .

To a new state, ...	1
To a new city or town in the same state, or ..	2
To a new home in the same city or town?	3
REFUSED	7
DON'T KNOW	9

BOX 8

ASK CMQ.600 FOR EACH SAMPLED CHILD.

CMQ.600   My records indicate that {CHILD} currently attends {NAME OF SCHOOL}. Will {he/she} still be attending this school in {NEXT ROUND}?

CAPI INSTRUCTION: DISPLAY NAME OF THE SCHOOL CHILD CURRENTLY ATTENDS.

YES	1
NO	2
REFUSED	7
DON'T KNOW	9

BOX 8A

IF NumberOfChildren = 1 OR IF NumberOfChildren = 2 AND ChildNum = 1 AND CMQ.600=2 (NO), GO TO CMQ.610.
IF NumberOfChildren = 2 AND ChildNum = 2 AND CMQ.600=2 (NO), GO TO CMQ.605.
OTHERWISE, GO TO BOX 9.

CMQ.605   Will {CHILD 2} attend the same new school as {CHILD 1} in {NEXT ROUND}?

YES...	1	(BOX 9)
NO	2	(CMQ.610)
REFUSED	7	(B0X 9)
DON'T KNOW	9	(BOX 9)

CMQ.610   What is the name, address, and telephone number of the school {CHILD} will attend in {NEXT ROUND}?

ENTER SCHOOL NAME.

CMQ.620   [What is the name, address, and telephone number of the school {CHILD} will attend in {NEXT ROUND}?]

ENTER STREET ADDRESS, LINE 1.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.630   [What is the name, address, and telephone number of the school {CHILD} will attend in {NEXT ROUND}?]

ENTER STREET ADDRESS, LINE 2.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.640   [What is the name, address, and telephone number of the school {CHILD} will attend in {NEXT ROUND}?]

ENTER CITY.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.650   **HELP AVAILABLE**

[What is the name, address, and telephone number of the school {CHILD} will attend in {NEXT ROUND}?]

ENTER STATE.

CAPI INSTRUCTION: DISPLAY STATE ABBREVIATIONS IN F1 HELP TEXT.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.660   [What is the name, address, and telephone number of the school {CHILD} will attend in {NEXT ROUND}?]

ENTER ZIP CODE.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.670   [What is the name, address, and telephone number of the school {CHILD} will attend in {NEXT ROUND}?]

ENTER PHONE NUMBER, INCLUDING AREA CODE/EXTENSION.

CAPI INSTRUCTION: ADD A SEPARATE RESPONSE FIELD FOR ENTERING TELEPHONE EXTENSION.

CAPI INSTRUCTION: IF THE PHONE NUMBER FIELD HAS ENTRIES, THE CURSOR SHOULD MOVE TO THE EXTENSION FIELD

CAPI INSTRUCTION: ALLOW 10 SPACES FOR THE EXTENSION FIELD.

CAPI INSTRUCTION: EMPTY IS ALLOWED AT THE EXTENSION FIELD.

CAPI INSTRUCTION: WHEN THE CURSOR IS AT THE EXTENSION FIELD, DISPLAY THE INTERVIEWER INSTRUCTION: 'ENTER EXTENSION.'

CAPI INSTRUCTION: IF DK OR RF AT THE PHONE NUMBER FIELD, THE CURSOR SHOULD SKIP THE EXTENSION FIELD AND MOVE TO THE NEXT ITEM.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.671   Is it a public or private school?

> PUBLIC 1 (CMQ.672)
> PRIVATE 2 (CMQ.673)
> REFUSED .... 7 (BOX 9)
> DON'T KNOW .... 9 (BOX 9)

CMQ.672   What is the name of the district this school is located in?

PROGRAMMER:
IF GET DISTRICT, ROUTE INTERVIEWER TO BOX 9.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

CMQ.673   What type of private school is it?

PROBE: Is it Catholic, another type of religious affiliation, or is it non-religious?

> CATHOLIC 1 (CMQ.674)
> ANOTHER TYPE OF RELIGIOUS
>   AFFILIATION .... 2 (BOX 9)
> NON-RELIGIOUS .... 3 (BOX 9)
> REFUSED .... 7 (BOX 9)
> DON'T KNOW .... 9 (BOX 9)

CMQ.674   What is the name of the diocese?

PROGRAMMER: ROUTE INTERVIEWER TO BOX 9.

CAPI INSTRUCTION: REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

BOX 9

END LOOP 1:

- IF NO NEXT SAMPLED CHILD, CONTINUE WITH CMQ.680.

- OTHERWISE, GO TO BOX 1 IN INQ FOR THE NEXT SAMPLED CHILD (TWIN) THAT IS PART OF THIS HOUSEHOLD.

CMQ.680   WAS THIS INTERVIEW CONDUCTED BY TELEPHONE OR IN-PERSON?

> TELEPHONE 1
> IN-PERSON 2

CMQ.690   WAS THIS INTERVIEW CONDUCTED IN ENGLISH, SPANISH, OR ANOTHER LANGUAGE?

                         ENGLISH 1 (CMQ.695BX)
                         SPANISH 2 (CMQ.695BX)
                         ANOTHER LANGUAGE (SPECIFY)
                         _____ 91 (CMQ.690OS)

CMQ.690OS   [WAS THIS INTERVIEW CONDUCTED IN ENGLISH, SPANISH, OR ANOTHER LANGUAGE?]

             SPECIFY OTHER LANGUAGE.

                         _____
                                      OTHER LANGUAGE

             CAPI INSTRUCTION: DK AND RF DISALLOWED.

CMQ.695BX   SET FINAL DISPOSITION CODE:

             IF CMQ.680 = 1 (TELEPHONE) AND CMQ.690 = 1 (ENGLISH), SET DISPOSITION CODE TO 60.

             IF CMQ.680 = 1 (TELEPHONE) AND CMQ.690 = 2 (SPANISH), SET DISPOSITION CODE TO 61.

             IF CMQ.680 = 1 (TELEPHONE) AND CMQ.690 = 3 (ANOTHER LANGUAGE), SET DISPOSITION
             CODE TO 62.

             IF CMQ.680 = 2 (IN-PERSON) AND CMQ.690 = 1 (ENGLISH), SET DISPOSITION CODE TO 63.

             IF CMQ.680 = 2 (IN-PERSON) AND CMQ.690 = 2 (SPANISH), SET DISPOSITION CODE TO 64.

             IF CMQ.680 = 2 (IN-PERSON) AND CMQ.690 = 3 (ANOTHER LANGUAGE), SET DISPOSITION
             CODE TO 65.

CMQ.700   Thank you for your cooperation and for taking the time to participate in the Early Childhood
             Longitudinal Study.

             PRESS ENTER TO CONTINUE.

CMQ.720   PRESS 1 AND ENTER TO SAVE AND EXIT THIS CASE.