

**STOP**

**PLEASE DO NOT TURN THE PAGE  
UNTIL INSTRUCTED TO DO SO.**

IEA Trends in International Mathematics and Science Study

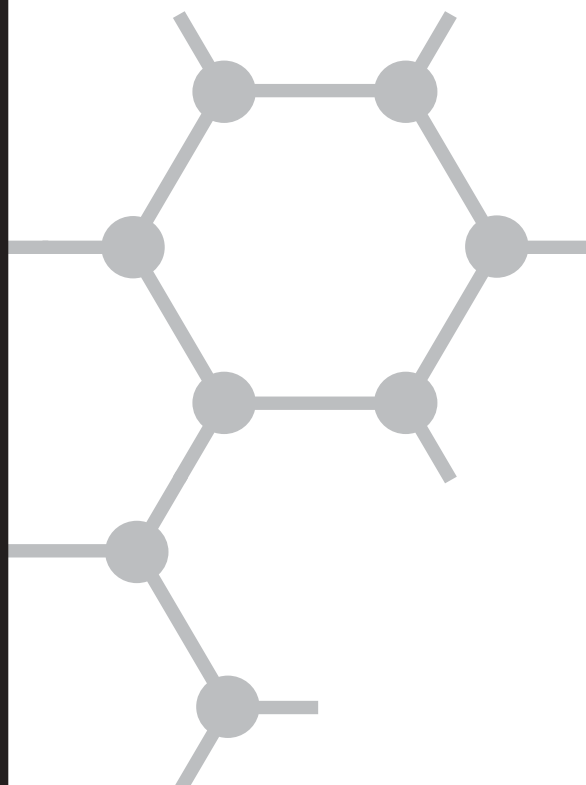
**T I M S S**

**2003**

**Main Survey**

**Student  
Questionnaire**

**Grade 4**



# General Directions

In this booklet, you will find questions about yourself. Some questions ask for facts while other questions ask for your opinions.

Read each question carefully and answer as accurately as possible. You may ask for help if you do not understand something or are not sure how to answer.

Each of the questions is followed by possible choices indicated by a circle with a number in it. For these questions, shade in the circle with the answer of your choice as shown in Examples 1, 2, and 3.

## Example 1

Do you go to school?

Fill in **one** circle only

- Yes ..... ●  
No ..... ②

## Example 2

How often do you do these things?

Fill in **one** circle for each line

- |                                 | Every day | At least once a week | Once or twice a month | A few times a year | Never |
|---------------------------------|-----------|----------------------|-----------------------|--------------------|-------|
| a) I listen to music .....      | ↓         | ↓                    | ↓                     | ↓                  | ↓     |
|                                 | ①         | ②                    | ●                     | ④                  | ⑤     |
| b) I talk with my friends ..... | ●         | ②                    | ③                     | ④                  | ⑤     |
| c) I play sports .....          | ①         | ●                    | ③                     | ④                  | ⑤     |

### Example 3

Indicate how much you agree with each of these statements.

Fill in **one** circle for each line

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
	↓	↓	↓	↓
a) Watching movies is fun .....	①	●	③	④
b) I like eating ice cream .....	●	②	③	④

Read each question carefully and pick the answer you think is best. Fill in the circle that shows your answer. If you decide to change your answer, erase your first answer and then fill in the circle next to or under your new answer. Ask for help if you do not understand something or are not sure how to answer.

Thank you for your time, effort, and thought in completing this questionnaire.

# About You

1

## When were you born?

A. Fill in the circle next to the year you were born

- Year**
- ① 1990
  - ② 1991
  - ③ 1992
  - ④ 1993
  - ⑤ 1994
  - ⑥ 1995
  - ⑦ 1996
  - ⑧ Other

B. Fill in the circle next to the month you were born

- Month**
- ① January
  - ② February
  - ③ March
  - ④ April
  - ⑤ May
  - ⑥ June
  - ⑦ July
  - ⑧ August
  - ⑨ September
  - ⑩ October
  - ⑪ November
  - ⑫ December

2

## A. Are you a girl or a boy?

Fill in **one** circle only

- Girl ..... ①
- Boy ..... ②

**B. Are you Hispanic or Latino?**

*Fill in **one** circle only*

Yes, I am Hispanic or Latino. ----- ①

No, I am not Hispanic or Latino. ----- ②

**C. Which of the following best describes you?**

*Fill in **as many** circles as you need to*

White ----- ①

Black or African American ----- ②

Asian ----- ③

American Indian or Alaska Native ----- ④

Native Hawaiian or other Pacific Islander ----- ⑤

**3**

**How often do you speak English at home?**

*Fill in **one** circle only*

Always ----- ①

Almost always ----- ②

Sometimes ----- ③

Never ----- ④

# ...About You (Continued)

4

**About how many books are there in your home? (Do not count magazines, newspapers, or your school books.)**

Fill in **one** circle only

None or very few

(0-10 books) ----- ① This shows 10 books



Enough to fill one shelf

(11-25 books) ----- ② This shows 25 books



Enough to fill one bookcase

(26-100 books) ----- ③ This shows 100 books



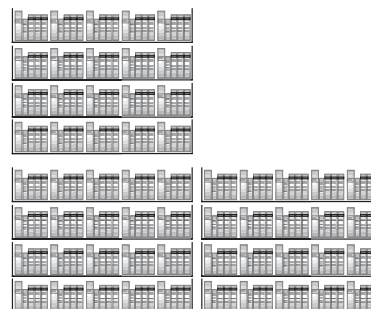
Enough to fill two bookcases

(101-200 books) ----- ④ This shows 200 books



Enough to fill three or more bookcases

(more than 200 books) ----- ⑤ This shows more than 200 books



# 5

## Do you have any of these items at your home?

Fill in **one** circle for each line

Yes                  No  
↓                      ↓

- a) Calculator ----- ① ----- ②
- b) Computer (do not include PlayStation®, GameCube®, XBox®, or other TV/video game system) ----- ① ----- ②
- c) Study desk/table for your use ----- ① ----- ②
- d) Dictionary ----- ① ----- ②
- e) Encyclopedia (as a book or CD) ----- ① ----- ②
- f) PlayStation®, GameCube®, XBox®, or other TV/video game system ----- ① ----- ②
- g) DVD player ----- ① ----- ②
- h) Three or more cars, small trucks or sport utility vehicles ----- ① ----- ②

# Mathematics in School

6

How much do you agree with these statements about learning mathematics?

Fill in **one** circle for each line

- |   | Agree<br>a lot | Agree<br>a little | Disagree<br>a little | Disagree<br>a lot |
|---|----------------|-------------------|----------------------|-------------------|
|   | ↓              | ↓                 | ↓                    | ↓                 |
| a) I usually do well in mathematics -----                               | ①              | ②                 | ③                    | ④                 |
| b) I would like to do more mathematics<br>in school-----                | ①              | ②                 | ③                    | ④                 |
| c) Mathematics is harder for me than<br>for many of my classmates ----- | ①              | ②                 | ③                    | ④                 |
| d) I enjoy learning mathematics -----                                   | ①              | ②                 | ③                    | ④                 |
| e) I am just not good at mathematics-----                               | ①              | ②                 | ③                    | ④                 |
| f) I learn things quickly in mathematics                                | ①              | ②                 | ③                    | ④                 |



## How often do you do these things in your mathematics lessons?

Fill in **one** circle for each line

- |   | Every or<br>almost<br>every<br>lesson | About<br>half the<br>lessons | Some<br>lessons | Never |
|---|---------------------------------------|------------------------------|-----------------|-------|
|   | ↓                                     | ↓                            | ↓               | ↓     |
| a) I practice adding, subtracting,<br>multiplying, and dividing without<br>using a calculator ----- | ①                                     | ②                            | ③               | ④     |
| b) I work on fractions and decimals -----   | ①                                     | ②                            | ③               | ④     |
| c) I measure things in the classroom<br>and around the school -----                                 | ①                                     | ②                            | ③               | ④     |
| d) I make tables, charts, or graphs -----   | ①                                     | ②                            | ③               | ④     |
| e) I learn about shapes such as circles,<br>triangles, and rectangles -----                         | ①                                     | ②                            | ③               | ④     |
| f) I work with other students<br>in small groups -----  | ①                                     | ②                            | ③               | ④     |
| g) I explain my answers -----   | ①                                     | ②                            | ③               | ④     |
| h) I listen to the teacher talk -----   | ①                                     | ②                            | ③               | ④     |
| i) I work problems on my own -----  | ①                                     | ②                            | ③               | ④     |
| j) I use a calculator -----   | ①                                     | ②                            | ③               | ④     |

# Science in School

8

How much do you agree with these statements about learning science?

Fill in **one** circle for each line

- |   | Agree<br>a lot | Agree<br>a little | Disagree<br>a little | Disagree<br>a lot |
|---|----------------|-------------------|----------------------|-------------------|
|   | ↓              | ↓                 | ↓                    | ↓                 |
| a) I usually do well in science .....                               | ①              | ②                 | ③                    | ④                 |
| b) I would like to do more science<br>in school .....               | ①              | ②                 | ③                    | ④                 |
| c) Science is harder for me than for<br>many of my classmates ..... | ①              | ②                 | ③                    | ④                 |
| d) I enjoy learning science .....                                   | ①              | ②                 | ③                    | ④                 |
| e) I am just not good at science .....                              | ①              | ②                 | ③                    | ④                 |
| f) I learn things quickly in science .....                          | ①              | ②                 | ③                    | ④                 |

## In school, how often do you do these things?

Fill in **one** circle for each line

- |   | At least<br>once a<br>week | Once or<br>twice a<br>month | A few<br>times a<br>year | Never |
|---|----------------------------|-----------------------------|--------------------------|-------|
|   | ↓                          | ↓                           | ↓                        | ↓     |
| a) I watch the teacher do a science experiment .....  | ①                          | ②                           | ③                        | ④     |
| b) I design or plan a science experiment or investigation .....                               | ①                          | ②                           | ③                        | ④     |
| c) I do a science experiment or investigation .....   | ①                          | ②                           | ③                        | ④     |
| d) I work with other students in a small group on a science experiment or investigation ..... | ①                          | ②                           | ③                        | ④     |
| e) I write or give an explanation for something I am studying in science .....                | ①                          | ②                           | ③                        | ④     |
| f) I look at something like the weather or a plant growing and write down what I see .....    | ①                          | ②                           | ③                        | ④     |
| g) I listen to the teacher talk .....   | ①                          | ②                           | ③                        | ④     |
| h) I work problems on my own .....  | ①                          | ②                           | ③                        | ④     |

# Computers

10

A. Do you ever use a computer? (Do not include PlayStation®, GameCube®, Xbox®, or other TV/video game system).

Yes      No  
↓        ↓

Fill in **one** circle only ----- ① ----- ②

If **No**, please go to question **11** on next page 

B. Where do you use a computer?

Fill in **one** circle for each line

Yes      No  
↓        ↓

- a) At home ----- ① ----- ②  
b) At school ----- ① ----- ②  
c) At a library ----- ① ----- ②  
d) At a friend's home ----- ① ----- ②  
e) At an Internet café ----- ① ----- ②  
f) Elsewhere ----- ① ----- ②

C. How often do you do these things with a computer?

Fill in **one** circle for each line

Every day      At least once a week      Once or twice a month      A few times a year      Never  
↓                ↓                ↓                ↓                ↓

- a) I look up ideas and information for mathematics ----- ① ----- ② ----- ③ ----- ④ ----- ⑤  
b) I look up ideas and information for science ----- ① ----- ② ----- ③ ----- ④ ----- ⑤  
c) I write reports for school ----- ① ----- ② ----- ③ ----- ④ ----- ⑤

# Your School

11

How much do you agree with these statements about your school?

Fill in **one** circle for each line

- |  | Agree<br>a lot | Agree<br>a little | Disagree<br>a little | Disagree<br>a lot |
|--|----------------|-------------------|----------------------|-------------------|
|  | ↓              | ↓                 | ↓                    | ↓                 |
| a) I like being in school .....  | ①              | ②                 | ③                    | ④                 |
| b) I think that most students in my<br>school try to do their best.....        | ①              | ②                 | ③                    | ④                 |
| c) I think that most teachers in my<br>school care about the students .....    | ①              | ②                 | ③                    | ④                 |
| d) I think that most teachers in my<br>school want students to do their best - | ①              | ②                 | ③                    | ④                 |

# Things You Do Outside of School

12

On a normal school day, how much time do you spend before or after school doing each of these things?

Fill in **one** circle for each line

	No time	Less than 1 hour	1-2 hours	More than 2 but less than 4 hours	4 or more hours
	↓	↓	↓	↓	↓
a) I watch television and videos .....	①	②	③	④	⑤
b) I play computer games .....	①	②	③	④	⑤
c) I play or talk with friends .....	①	②	③	④	⑤
d) I do jobs or chores at home .....	①	②	③	④	⑤
e) I play sports .....	①	②	③	④	⑤
f) I read a book for enjoyment .....	①	②	③	④	⑤
g) I use the Internet .....	①	②	③	④	⑤
h) I do homework .....	①	②	③	④	⑤

# 13

**A. During this school year, how often have you had tutoring or extra lessons in mathematics that are not part of your regular class?**

*Fill in **one** circle only*

Every or almost every day ----- ①

Once or twice a week ----- ②

Sometimes ----- ③

Never or almost never ----- ④

**B. During this school year, how often have you had tutoring or extra lessons in science that are not part of your regular class?**

*Fill in **one** circle only*

Every or almost every day ----- ①

Once or twice a week ----- ②

Sometimes ----- ③

Never or almost never ----- ④

# ...Outside of School (Continued)

**14**

**A. How often does your teacher give you homework in mathematics?**

*Fill in **one** circle only*

Every day ..... ①

3 or 4 times a week ..... ②

1 or 2 times a week ..... ③

Less than once a week ..... ④

Never ..... ⑤

*If **Never**, please go to question **15** on next page*



**B. When your teacher gives you mathematics homework, about how long does it take you to complete this homework?**

*Fill in **one** circle only*

Less than 15 minutes ..... ①

15–30 minutes ..... ②

31–60 minutes ..... ③

61–90 minutes ..... ④

More than 90 minutes ..... ⑤



**15**

**A. How often does your teacher give you homework in science?**

*Fill in **one** circle only*

Every day ----- ①

3 or 4 times a week ----- ②

1 or 2 times a week ----- ③

Less than once a week ----- ④

Never ----- ⑤

*If **Never**, please go to question **16** on next page*



**B. When your teacher gives you science homework, about how long does it take you to complete this homework?**

*Fill in **one** circle only*

Less than 15 minutes ----- ①

15–30 minutes ----- ②

31–60 minutes ----- ③

61–90 minutes ----- ④

More than 90 minutes ----- ⑤

# More About You

16

Including yourself, how many people live in your home?

Fill in **one** circle only

2 ----- ②

3 ----- ③

4 ----- ④

5 ----- ⑤

6 ----- ⑥

7 ----- ⑦

8 or more ----- ⑧

17

A. Was your mother (or stepmother or female guardian) born in the United States?\*

Yes      No  
↓        ↓

Fill in **one** circle only ----- ① ----- ②

B. Was your father (or stepfather or male guardian) born in the United States?\*

Yes      No  
↓        ↓

Fill in **one** circle only ----- ① ----- ②


\*Note: "United States" includes the 50 states, its territories, the District of Columbia, and U.S. military bases abroad.

**18**

**A. Were you born in the United States?**

Yes                  No  
↓                      ↓

Fill in **one** circle only ----- ① ----- ②

If **Yes**, you have completed the questionnaire 

**B. If you were not born in the United States, how old were you when you came to the United States?**

Fill in **one** circle only

Younger than 1 year old ----- ①

1 to 5 years old ----- ②

Older than 5 years old ----- ③

# Thank You

**for completing  
this questionnaire**



**TIMSS International Study Center**

Boston College  
Chestnut Hill, MA 02467

©IEA, Amsterdam (2002)

G4 - Booklet

**1**

