

Identification Label

Student ID:

Student Name:

Trends in International Mathematics and Science Study

TIMSS 2007



Student Questionnaire

<Grade 8>

<TIMSS National Research Center Name>

<Address>



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General Directions

In this questionnaire, 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 respond.

Each question is followed by a number of answers. Shade in the circle next to 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 next to or below your answer. If you decide to change an answer to a question, put an “x” over your first choice, and then fill in the circle for your new choice. 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

1989 -

1990 -

1991 -

1992 -

1993 -

1994 -

1995 -

1996 -

Other -

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

Month

January -

February -

March -

April -

May -

June -

July -

August -

September -

October -

November -

December -

2

Are you a girl or a boy?

Fill in **one** circle only

Girl-----

Boy-----

3

How often do you speak <language of test> at home?

*Fill in **one** circle only*

- Always ----- ①
- Almost always ----- ②
- Sometimes ----- ③
- Never ----- ④

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
- Enough to fill one shelf
(11-25 books)----- ②
- Enough to fill one bookcase
(26-100 books)----- ③
- Enough to fill two bookcases
(101-200 books)----- ④
- Enough to fill three or more bookcases
(more than 200 books)----- ⑤

About You (Continued)

5

Do you have any of these things 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 computers) - ① ----- ②
- c) Study desk/table for your use ----- ① ----- ②
- d) Dictionary ----- ① ----- ②
- e) Internet connection ----- ① ----- ②
- f) <country-specific> ----- ① ----- ②
- g) <country-specific> ----- ① ----- ②
- h) <country-specific> ----- ① ----- ②
- i) <country-specific> ----- ① ----- ②

6

A. What is the highest level of education completed by your mother (or stepmother or female guardian)?

*Fill in **one** circle only*

- Some <ISCED Level 1 or 2 > or did not go to school ----- ①
- <ISCED 2>----- ②
- <ISCED 3>----- ③
- <ISCED 4>----- ④
- <ISCED 5B> ----- ⑤
- <ISCED 5A, first degree> ----- ⑥
- Beyond <ISCED 5A, first degree> ----- ⑦
- I don't know ----- ⑧

B. What is the highest level of education completed by your father (or stepfather or male guardian)?

*Fill in **one** circle only*

- Some <ISCED Level 1 or 2 > or did not go to school ----- ①
- <ISCED 2>----- ②
- <ISCED 3>----- ③
- <ISCED 4>----- ④
- <ISCED 5B> ----- ⑤
- <ISCED 5A, first degree> ----- ⑥
- Beyond <ISCED 5A, first degree> ----- ⑦
- I don't know ----- ⑧

About You (Continued)

7

How far in school do you expect to go?

*Fill in **one** circle only*

Finish <ISCED 3> ----- ①

Finish <ISCED 4> ----- ②

Finish <ISCED 5B> ----- ③

Finish <ISCED 5A, first degree> ----- ④

Beyond <ISCED 5A, first degree> ----- ⑤

I don't know ----- ⑥

Mathematics in School

8

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

Fill in **one** circle for each line

- | | Agree
a lot
↓ | Agree
a little
↓ | Disagree
a little
↓ | Disagree
a lot
↓ |
|---------------------------------------------------------------------------------|---------------------|------------------------|---------------------------|------------------------|
| a) I usually do well in mathematics ----- | ① | ② | ③ | ④ |
| b) I would like to take more
mathematics in school ----- | ① | ② | ③ | ④ |
| c) Mathematics is more difficult for me
than for many of my classmates ----- | ① | ② | ③ | ④ |
| d) I enjoy learning mathematics ----- | ① | ② | ③ | ④ |
| e) Mathematics is not one of
my strengths ----- | ① | ② | ③ | ④ |
| f) I learn things quickly in mathematics | ① | ② | ③ | ④ |
| g) Mathematics is boring ----- | ① | ② | ③ | ④ |
| h) I like mathematics ----- | ① | ② | ③ | ④ |

Mathematics in School (Continued)

9

How much do you agree with these statements about mathematics?

Fill in **one** circle for each line

Agree
a lot
↓

Agree
a little
↓

Disagree
a little
↓

Disagree
a lot
↓

- a) I think learning mathematics will help me in my daily life ----- ① ----- ② ----- ③ ----- ④
- b) I need mathematics to learn other school subjects ----- ① ----- ② ----- ③ ----- ④
- c) I need to do well in mathematics to get into the <university> of my choice ----- ① ----- ② ----- ③ ----- ④
- d) I need to do well in mathematics to get the job I want ----- ① ----- ② ----- ③ ----- ④

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

Fill in **one** circle for each line

	Every or almost every lesson	About half the lessons	Some lessons	Never
	↓	↓	↓	↓
a) We practice adding, subtracting, multiplying, and dividing without using a calculator -----	①-----	②-----	③-----	④
b) We work on fractions and decimals -----	①-----	②-----	③-----	④
c) We solve problems about geometric shapes, lines and angles -----	①-----	②-----	③-----	④
d) We interpret data in tables, charts, or graphs -----	①-----	②-----	③-----	④
e) We write equations and functions to represent relationships -----	①-----	②-----	③-----	④
f) We memorize formulas and procedures -----	①-----	②-----	③-----	④
g) We explain our answers -----	①-----	②-----	③-----	④
h) We relate what we are learning in mathematics to our daily lives -----	①-----	②-----	③-----	④
i) We decide on our own procedures for solving complex problems -----	①-----	②-----	③-----	④
j) We review our homework -----	①-----	②-----	③-----	④
k) We listen to the teacher give a lecture-style presentation -----	①-----	②-----	③-----	④
l) We work problems on our own -----	①-----	②-----	③-----	④
m) We work together in small groups -----	①-----	②-----	③-----	④
n) We begin our homework in class -----	①-----	②-----	③-----	④
o) We have a quiz or test -----	①-----	②-----	③-----	④
p) We use calculators -----	①-----	②-----	③-----	④
q) We use computers -----	①-----	②-----	③-----	④

Science in School

11

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

Fill in **one** circle for each line

- | | Agree
a lot
↓ | Agree
a little
↓ | Disagree
a little
↓ | Disagree
a lot
↓ |
|-----------------------------------------------------------------------------|---------------------|------------------------|---------------------------|------------------------|
| a) I usually do well in science ----- | ① ----- | ② ----- | ③ ----- | ④ |
| b) I would like to take more science
in school ----- | ① ----- | ② ----- | ③ ----- | ④ |
| c) Science is more difficult for me
than for many of my classmates ----- | ① ----- | ② ----- | ③ ----- | ④ |
| d) I enjoy learning science ----- | ① ----- | ② ----- | ③ ----- | ④ |
| e) Science is not one of my strengths --- | ① ----- | ② ----- | ③ ----- | ④ |
| f) I learn things quickly in science ----- | ① ----- | ② ----- | ③ ----- | ④ |
| g) Science is boring----- | ① ----- | ② ----- | ③ ----- | ④ |
| h) I like science ----- | ① ----- | ② ----- | ③ ----- | ④ |

How much do you agree with these statements about science?

Fill in **one** circle for each line

Agree
a lot
↓

Agree
a little
↓

Disagree
a little
↓

Disagree
a lot
↓

- a) I think learning science
will help me in my daily life ----- ① ----- ② ----- ③ ----- ④
- b) I need science to learn
other school subjects ----- ① ----- ② ----- ③ ----- ④
- c) I need to do well in science
to get into the <university>
of my choice ----- ① ----- ② ----- ③ ----- ④
- d) I need to do well in science
to get the job I want ----- ① ----- ② ----- ③ ----- ④

Science in School (Continued)

13

How often do you do these things in your science lessons?

Fill in **one** circle for each line

	Every or almost every lesson ↓	About half the lessons ↓	Some lessons ↓	Never ↓
a) We make observations and describe what we see	①	②	③	④
b) We watch the teacher demonstrate an experiment or investigation	①	②	③	④
c) We design or plan an experiment or investigation	①	②	③	④
d) We conduct an experiment or investigation	①	②	③	④
e) We work in small groups on an experiment or investigation	①	②	③	④
f) We read our science textbooks and other resource materials	①	②	③	④
g) We memorize science facts and principles	①	②	③	④
h) We use scientific formulas and laws to solve problems	①	②	③	④
i) We give explanations about what we are studying	①	②	③	④
j) We relate what we are learning in science to our daily lives	①	②	③	④
k) We review our homework	①	②	③	④
l) We listen to the teacher give a lecture-style presentation	①	②	③	④
m) We work problems on our own	①	②	③	④
n) We begin our homework in class	①	②	③	④
o) We have a quiz or test	①	②	③	④
p) We use computers	①	②	③	④

Computers

14

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

Yes No
↓ ↓

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

If **No**, please go to question 15



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) Elsewhere (e.g., public library,
friend's home, Internet café) ----- ① ----- ②

C. How often do you use a computer for your schoolwork (in and out of school)?

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) In mathematics ----- ① ----- ② ----- ③ ----- ④ ----- ⑤

b) In science ----- ① ----- ② ----- ③ ----- ④ ----- ⑤

Your School

15

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

Fill in **one** circle for each line

- | | Agree
a lot
↓ | Agree
a little
↓ | Disagree
a little
↓ | Disagree
a lot
↓ |
|------------------------------------------------------------------------------|---------------------|------------------------|---------------------------|------------------------|
| a) I like being in school ----- | ① ----- | ② ----- | ③ ----- | ④ |
| b) I think that students in my school
try to do their best ----- | ① ----- | ② ----- | ③ ----- | ④ |
| c) I think that teachers in my school
want students to do their best----- | ① ----- | ② ----- | ③ ----- | ④ |

16

In school, did any of these things happen during the last month?

Fill in **one** circle for each line

- | | Yes
↓ | No
↓ |
|-------------------------------------------------------------------------------------|----------|---------|
| a) Something of mine was stolen ----- | ① ----- | ② |
| b) I was hit or hurt by other student(s)
(e.g., shoving, hitting, kicking) ----- | ① ----- | ② |
| c) I was made to do things I didn't
want to do by other students ----- | ① ----- | ② |
| d) I was made fun of or called names --- | ① ----- | ② |
| e) I was left out of activities by other
students ----- | ① ----- | ② |

Things You Do Outside of School

17

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 at home -----	① -----	② -----	③ -----	④ -----	⑤ -----
e) I work at a paid job -----	① -----	② -----	③ -----	④ -----	⑤ -----
f) I play sports -----	① -----	② -----	③ -----	④ -----	⑤ -----
g) I read a book for enjoyment -----	① -----	② -----	③ -----	④ -----	⑤ -----
h) I use the Internet -----	① -----	② -----	③ -----	④ -----	⑤ -----
i) I do homework -----	① -----	② -----	③ -----	④ -----	⑤ -----

Homework

18

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 19



B. When your teacher gives you mathematics homework, about how many minutes do you usually spend on your homework?

Fill in **one** circle only


- Zero minutes ----- ①
- 1 - 15 minutes ----- ②
- 16-30 minutes ----- ③
- 31-60 minutes ----- ④
- 61-90 minutes ----- ⑤
- More than 90 minutes ----- ⑥

19

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 **20*** 

B. When your teacher gives you science homework, about how many minutes do you usually spend on your homework?

*Fill in **one** circle only*

- Zero minutes ----- ①
- 1 - 15 minutes ----- ②
- 16–30 minutes ----- ③
- 31–60 minutes ----- ④
- 61–90 minutes ----- ⑤
- More than 90 minutes ----- ⑥

More About You

20

A. Was your mother (or stepmother or female guardian) born in <country>?

Yes No
↓ ↓

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

B. Was your father (or stepfather or male guardian) born in <country>?

Yes No
↓ ↓

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

21

A. Were you born in <country>?

Yes No
↓ ↓

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

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

B. If you were not born in <country>, how old were you when you came to <country>?

Fill in **one** circle only

Older than 10 years old ----- ①

5 to 10 years old ----- ②

Younger than 5 years old ----- ③

Thank You
for completing
this questionnaire



TIMSS & PIRLS
International Study Center
Lynch School of Education, Boston College

Student Questionnaire

<Grade 8>