

VIRTUAL LINGUISTICS LAB

CHILD MULTILINGUALISM QUESTIONNAIRE

*(Prepared by the Cornell Language
Acquisition Lab (CLAL) in conjunction
with the Founding Members of
the Virtual Center for the Study of
Language Acquisition*)*

Editors

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Cornell Language Acquisition Laboratory (CLAL): <http://www.clal.cornell.edu/index.php>

The Virtual Center for the Study of Language Acquisition (VCLA) : <http://www.clal.cornell.edu/VCLA/index.html>

**Founding Members of the Virtual Center for Language Acquisition Research include Cornell:
Barbara Lust, Marianella Casasola, Qi Wang, Elise Temple; University of Texas at El Paso: María
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Flynn; Boston College: Claire Foley; California State University at San Bernardino: Yu Chin Chien;
Southern Illinois University at Carbondale: Usha Lakshmanan).*

Purpose of the Questionnaire

The purpose of this questionnaire is to gather background information on children who are bilingual or multilingual or who are exposed to a bilingual or multilingual situation. Through this information the parents or caretakers and teachers as well as researchers can come to better understand the nature and quality and degree of a child's developing multilingual language acquisition.

Contents

- Part I. Information About the Child**
- Part II. Family Background Information**
- Part III. Child Language Information**
- Part IV. Code-Switching (Language Mixing)**
- Part V. Reading/Writing**
- Part VI. Comments**

**Where sections or questions are not relevant, simply leave blank or write 'NA,' Not Applicable."

Administrative Information

This questionnaire should be administered to parents in collaboration with an interviewer:

In the first stage: Parents or caretakers may complete the questionnaire at home and return it to the school director or teachers, or the interviewer may work with the parent or caretaker to complete it. The later is preferable if possible.

In the second stage: Parents/caretaker & Interviewer – once the questionnaire has been returned, the interviewer will conduct an interview either in person or over the phone to complete the fields that need assistance for clarification or explanation.

Participants & Interviewer Information

Participation Date	(month/day/year)	
Contact Information	Name:	
	Phone:	Email:
	Relation to child:	
Interviewer Info (Research Assistant)	Name:	
	Phone:	Email:
Child's information	Name	Age
	Birth date (mm/dd/yyyy)	Serial Number
	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	

Part I: Information about the Child

Place of Birth	City/Village	State/Province	Country
	Duration of stay: (years) (months)		
Current Residence	City/Village	State/Province	Country
	Duration of stay: (years) (months)		
Other Places of Residence	City/Village	State/Province	Country
	Duration of stay: (years) (months)		
	City/Village	State/Province	Country
	Duration of stay: (years) (months)		

Does the child visit places where different languages are spoken? Where? How often?
(e.g., visiting relatives in other countries)

How shy is your child? (Please refer to the following scale.)

1	2	3	4	5
<i>Introverted/Very shy</i>			<i>Extroverted/Outgoing</i>	
<i><At school/Daycare></i>				
1	2	3	4	5
<i><At home></i>				
1	2	3	4	5
<i><At other places></i>				
1	2	3	4	5

Part II: Family Background Information

(1) Primary care giver's (or Mother) Information

Name		Nationality	
Age		Occupation	
Highest Degree: College <input type="checkbox"/> High School <input type="checkbox"/> Middle School <input type="checkbox"/> Master's <input type="checkbox"/> Doctorate <input type="checkbox"/> Others <input type="checkbox"/>			
(*Specify the type of other degrees)			
Place of birth		(Country)	(Years of stay)
Current Residence		(Country)	(Years of stay)
Other places of residence		(Country)	(Years of stay)
		(Country)	(Years of stay)

Please refer to the following scale when questions regarding the proficiency level in a language are being addressed

- 0 = Cannot speak and cannot understand the given language
- 1 = Cannot speak but understands the general idea of what is being said
- 2 = Limited proficiency and limited vocabulary
- 3 = Good proficiency
- 4 = Native-like proficiency
- DK = Don't know

Languages spoken:

(*Please specify the type of dialect for the language)

Proficiency Level of a primary caretaker

(L1: 1st acquired language, L2: 2nd language, L3: 3rd language, L4: 4th language)

(* Please refer to the scale provided above)

Production

Comprehension

L1: 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>	L1: 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>
L2: 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>	L2: 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>
L3: 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>	L3: 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>
L4: 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>	L4: 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>

Languages spoken to child:

Languages spoken to child's secondary care giver (or Father):

Part II: Family Background Information (continued)

(2) Secondary care giver's (or Father) Information

Name		Nationality	
Age		Occupation	
Highest Degree: College <input type="checkbox"/> High School <input type="checkbox"/> Middle School <input type="checkbox"/> Master's <input type="checkbox"/> Doctorate <input type="checkbox"/> Others <input type="checkbox"/>			
(*Specify the type of other degrees)			
Place of birth		(Country)	(Years of stay)
Current Residence		(Country)	(Years of stay)
Other places of residence		(Country)	(Years of stay)
		(Country)	(Years of stay)

Please refer to the following scale when questions regarding the proficiency level in a language are being addressed

- 0 = Cannot speak and cannot understand the given language
- 1 = Cannot speak but understands the general idea of what is being said
- 2 = Limited proficiency and limited vocabulary
- 3 = Good proficiency
- 4 = Native-like proficiency
- DK = Don't know

Languages spoken:

(*Please specify the type of dialect for the language)

Proficiency Level of a secondary caretaker

(L1: 1st acquired language, L2: 2nd language, L3: 3rd language, L4: 4th language)

Production

Comprehension

L1: 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>	L1: 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>
L2: 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>	L2: 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>
L3: 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>	L3: 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>
L4: 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>	L4: 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>

Languages spoken to child:

Languages spoken to child's primary care giver (or Mother):

Part II: Family Background Information (continued)

(3) Siblings Information (* Please refer to the scale provided on page 5)

Name (Age)	Language(s) spoken to child	Language(s) spoken to parents or others
1. ()		
Proficiency	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>
2. ()		
Proficiency	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>
3. ()		
Proficiency	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>
4. ()		
Proficiency	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>
5. ()		
Proficiency	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>
6. ()		
Proficiency	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> DK <input type="checkbox"/>

Comments:

Languages spoken in extended family:

Frequently contacted family members and their languages:

Languages spoken in community:

Comments:

Part III: Child Language Information

A. Background

(1) What language does the child speak?

Child's L1		Child's L2	
Child's L3		Child's L4	

(* L1: 1st language, L2: 2nd language, L3: 3rd language, L4: 4th language)

(2) Languages currently spoken by the child to parents/family & community members:

To primary care giver (mother)		To secondary care giver (father)	
To siblings		To other people	
To others*		To others*	

* Please specify the group.

(3) When and where did the child first get exposed to each language?

Languages	L1:	L2:	L3:	L4:
Age (year/month)				
Place of exposure				

(4) From when did the child begin to speak each language?

Languages	L1:	L2:	L3:	L4:
Age (year/month)				

(5) Did the child acquire the languages sequentially (one after another) or simultaneously (at the same time)?

(6) If the child speaks one language more dominantly than another/the others, which is it?

(7) Is the child a complete bilingual/multilingual?

- YES (i.e. You cannot distinguish his/her first language versus a second language)
- NO (i.e. The child speaks one language more fluently than other languages)
- NO (i.e. The child speaks one language but only understands other languages)

B. Language Exposure

(1) Has there been an initiative on the parents' side to encourage the child to learn both languages / one language over the other / additional languages? How much do you encourage bilingualism for your child? Please explain why or why not?

(2) How long has the child received/been exposed to formal/semi-formal education to learn the language (i.e., (natural) preschool/kindergarten immersion programs, or tutoring)

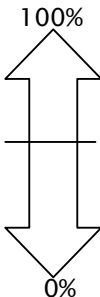
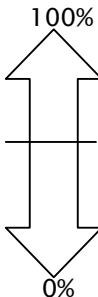
Programs	Preschool	Kindergarten	Tutoring	Others
Age (year ; month)	From to	From to	From to	From to

(* Please indicate what type of other education the child received.)

Comments:

(3) Is the child **exposed to** both (or more) languages **equally frequently**? YES NO Unsure

(*Please mark on the scale below how frequently the child is exposed to each language at home and outside home.) (*If the exact percentage scale is not shown, please write the number in the blank

<u>Home</u>	<u>Outside home</u>
<p>100%</p> <p>() Exclusively L1 (100%)</p> <p>() More L1 than L2 (80%)</p> <p>() Equally frequently (50%)</p> <p>() More L2 than L1 (40%)</p> <p>() Exclusively L2 (0%)</p> <p>0%</p> 	<p>100%</p> <p>() Exclusively L2 (100%)</p> <p>() More L2 than L1 (80%)</p> <p>() Equally frequently (50%)</p> <p>() More L1 than L2 (40%)</p> <p>() Exclusively L1 (0%)</p> <p>0%</p> 
* Exact percentage of L1 production () %	* Exact percentage of L2 production () %

Explain/Comment:

(4) How each of the following resources helps the child to become fluent in first(L1)/second(L2)/third language(L3)?

*Please indicate the degree of the child’s involvement in percentage.

Daycare/School Attendance	L1: ()%	L2 : ()%	L3 : ()%
Community Involvement (e.g., Church, play group, community events)	L1: ()%	L2 : ()%	L3 : ()%
Entertainment (e.g., Television, Movies, Games)	L1: ()%	L2 : ()%	L3 : ()%
Parental education (e.g., story telling, conversation)	L1: ()%	L2 : ()%	L3 : ()%
Tutoring	L1: ()%	L2 : ()%	L3 : ()%
Siblings	L1: ()%	L2 : ()%	L3 : ()%
Others (*Please explain below what they are)			

Comments:

(5) What do you think are the main resources that help the child to become fluent in a first(L1)/second (L2)/third language(L3)? Please rank the following.

Rank	Means of learning	Rank	Means of learning
	Daycare/School Attendance		Community Involvement
	Entertainment		Parental education
	Tutoring		Siblings
	Others (*please specify)		Others (*please specify)

Comments:

C. Comprehension & Production

(1) Does the child comprehend both (or more) languages **proficiently**? YES NO

- o Word level: YES NO
- o Sentence level: YES NO
- o Complex conversation/learning level: YES NO

Comments:

If you marked on the choice of 'no', please explain :

(2) In which language does the child have more knowledge and understanding?

(* L1: 1st language, L2: 2nd language, L3: 3rd language, L4: 4th language)

- o Word level: L1 L2 L3 L4
- o Sentence level: L1 L2 L3 L4
- o Complex conversation/learning level: L1 L2 L3 L4

Comments:

(3) Does the child **produce** both (or more) languages **equally frequently**? YES NO Unsure

(*Please mark on the scale below how frequently the child produces each language.)

(*If the exact percentage scale is not shown, please write the number in the blank

<u>1st Language (L1)</u>	<u>2nd Language (L2)</u>
<div style="text-align: center;">100%</div> <div style="text-align: center;"> </div> <div style="text-align: center;">0%</div> <p>() Exclusively L1 (100%)</p> <p>() More L1 than L2 (80%)</p> <p>() Equally frequently (50%)</p> <p>() More L2 than L1 (40%)</p> <p>() Exclusively L2 (0%)</p> <p>* Exact percentage of L1 production () %</p>	<div style="text-align: center;">100%</div> <div style="text-align: center;"> </div> <div style="text-align: center;">0%</div> <p>() Exclusively L2 (100%)</p> <p>() More L2 than L1 (80%)</p> <p>() Equally frequently (50%)</p> <p>() More L1 than L2 (40%)</p> <p>() Exclusively L1 (0%)</p> <p>* Exact percentage of L2 production () %</p>

Explain/Comment:

D. Child's Language Use in Context

(1) *<In school>* Does the child use all languages? YES NO

- Which language does the child use when speaking with friends/peers at school?
- Which language does the child use when speaking with teachers at school?

*If no, please explain which language(s) are used to what extent.

(2) *<At home>* Does the child use all languages? YES NO

*If no, please explain which language(s) are used to what extent.

(3) *<In other places>* Does the child use all languages? YES NO

*If no, please explain which language(s) are used to what extent.

(4) In which language does the child prefer to **tell jokes**? (Explain/Provide examples.)

(5) In which language does the child prefer to **sing**? (Explain/Provide examples.)

(6) In which language does the child prefer to **count**? (Explain/Provide examples.)

(7) Please specify which language does the child feel more comfortable using in each context?

(* L1: 1st language, L2: 2nd language, L3: 3rd language, L4: 4th language)

- At home with Parents: L1 L2 L3 L4
- At home with siblings: L1 L2 L3 L4
- Outside the home: L1 L2 L3 L4

(8) Does the child try to avoid going into an environment where a specific language is spoken? If so, why? (Explain/Provide examples)

E. Child's Motivation in Language Use

How motivated is your child in seeking to interact in 1st language (L1)?

Motivation Scale People/Mediums	Not at all		Fairly motivated		Highly motivated
At home:					
○ With parents/caretakers	1	2	3	4	5
○ With siblings	1	2	3	4	5
○ With other family members	1	2	3	4	5
○ With guests/strangers	1	2	3	4	5
At school					
○ With friends/peers	1	2	3	4	5
○ With teachers	1	2	3	4	5
○ With guests/strangers	1	2	3	4	5
Through television/movies	1	2	3	4	5
Through computer games/ interactive toys	1	2	3	4	5
Through books	1	2	3	4	5

How motivated is your child in seeking to interact in 2nd language (L2)?

Motivation Scale People/Mediums	Not at all		Fairly motivated		Highly motivated
At home:					
○ With parents/caretakers	1	2	3	4	5
○ With siblings	1	2	3	4	5
○ With other family members	1	2	3	4	5
○ With guests/strangers	1	2	3	4	5
At school					
○ With friends/peers	1	2	3	4	5
○ With teachers	1	2	3	4	5
○ With guests/strangers	1	2	3	4	5
Through television/movies	1	2	3	4	5
Through computer games/ interactive toys	1	2	3	4	5
Through books	1	2	3	4	5

How motivated is your child in seeking to interact in 3rd language (L3)?

Motivation Scale People/Mediums	Not at all	Fairly motivated	Highly motivated		
At home:					
○ With parents/caretakers	1	2	3	4	5
○ With siblings	1	2	3	4	5
○ With other family members	1	2	3	4	5
○ With guests/strangers	1	2	3	4	5
At school					
○ With friends/peers	1	2	3	4	5
○ With teachers	1	2	3	4	5
○ With guests/strangers	1	2	3	4	5
Through television/movies	1	2	3	4	5
Through computer games/interactive toys	1	2	3	4	5
Through books	1	2	3	4	5

How motivated is your child in seeking to interact in 4th language (L4)?

Motivation Scale People/Mediums	Not at all	Fairly motivated	Highly motivated		
At home:					
○ With parents/caretakers	1	2	3	4	5
○ With siblings	1	2	3	4	5
○ With other family members	1	2	3	4	5
○ With guests/strangers	1	2	3	4	5
At school					
○ With friends/peers	1	2	3	4	5
○ With teachers	1	2	3	4	5
○ With guests/strangers	1	2	3	4	5
Through television/movies	1	2	3	4	5
Through computer games/interactive toys	1	2	3	4	5
Through books	1	2	3	4	5

Part IV: Code-Switching (Language Mixing)

Child's Language Mixing

Does the child frequently change from one language to the other during conversation? YES NO

With parents? YES NO

Languages that the child switches:.....

Comments:

With siblings? YES NO

Languages that the child switches:.....

Comments:

With peers? YES NO

Languages that the child switches:.....

Comments:

Does the child frequently change from one language to the other in one sentence? YES NO

Languages that the child switches:.....

Examples:

Caregivers' (Parents') Language Mixing

Does the *mother* frequently change from one language to the other during conversation? YES NO

Languages that the mother switches:.....

Comments:

Caregivers' (Parents') Language Mixing (continued)

Does the **mother** frequently change from one language to the other in one sentence? YES NO

Languages that the mother switches:_____

Comments:

Does the **father** frequently change from one language to the other during conversation? YES NO

Languages that the father switches:_____

Comments:

Does the **father** frequently change from one language to the other in one sentence? YES NO

Languages that the father switches:_____

Comments:

Siblings' Language Mixing

Do **siblings or peers** frequently change from one language to the other during conversation? YES NO

Languages that siblings switch:_____

Comments:

Do **siblings or peers** frequently change from one language to the other in one sentence? YES NO

Languages that siblings switch:_____

Comments:

Extended Family Members' Language Mixing

Do the extended family members frequently change from one language to the other during conversation?

YES NO

Languages that the members switch:.....

Comments:

Do extended family members frequently change from one language to the other in one sentence?

YES NO

Languages that the members switch:.....

Comments:

Community's Language Mixing

Do community members frequently change from one language to the other during conversation?

YES NO

Languages that the members switch:.....

Comments:

Do community members frequently change from one language to the other in one sentence?

YES NO

Languages that the members switch:.....

Comments:

Part V: Reading/Writing (n.b. not applicable to very young children)

Reading

Has your child exposed to reading? YES NO

How long? How did it happen?

Does the child know how to read? YES NO

How well does the child read? Please mark on the provided scale below.

Proficiency Language	Perfectly		Well		Sufficiently			Scarcely			
1 st Language	10	9	8	7	6	5	4	3	2	1	0
2 nd Language	10	9	8	7	6	5	4	3	2	1	0
Additional Language(s)	10	9	8	7	6	5	4	3	2	1	0

Comments:

Writing

Has your child been exposed to writing? YES NO

How long? How did it happen?

Does the child know how to write? YES NO

How well does the child write? Please mark on the provided scale below.

Proficiency Language	Perfectly		Well		Sufficiently			Scarcely			
1 st Language	10	9	8	7	6	5	4	3	2	1	0
2 nd Language	10	9	8	7	6	5	4	3	2	1	0
Additional Language(s)	10	9	8	7	6	5	4	3	2	1	0

Comments:

Part VI: Comments by interviewer/Questions or notes from parents

Appendix

Please indicate how the child spends a typical week on hourly basis. Include where the child spends his time, with whom, and what language are spoken in his/her environment		Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Comments
	6:00-8:00								
	8:00-10:00								
	10:00-12:00								
	12:00-2:00								
	2:00-4:00								
	4:00-6:00								
	6:00-8:00								
	8:00-10:00								

History of the VLL Child Multilingual Questionnaire

The initial stages of this questionnaire grew out of lab meetings in the CLAL (Cornell Language Acquisition Lab) where a group was conducting experimental research in monolingual children acquiring English. At this time, many subjects were characterized as 'bilingual' by teacher report, which would eliminate them from the experimental study. The lab members realized the need for a way to capture "degree of bilingualism" in children, other than teacher report, and to verify bilingualism or multilingualism in the child. This concern grew even more important when a new group in the lab was initiating new research specifically on multilingualism in children.

At that time the Bilingual Questionnaire of Weber-Fox and Neville 1996 was consulted. As this is aimed at older children and/or adults, it was realized that a questionnaire aimed specifically at children was needed. Group members undertook to construct the CLAL Multilingual Questionnaire for Parents. This questionnaire was then circulated to the Virtual Center for the Study of Language Acquisition, and after input from Virtual Center founding members has now been revised as the current "Virtual Linguistic Lab Multilingual Questionnaire for Parents" In particular, the questionnaire was integrated by María Blume (University of Texas at El Paso), with a questionnaire created by VC founding member, Prof. Liliana Sanchez (Rutgers University.) which she had been developing specifically for the study of multilingualism.

CLAL members who participated in constructing the initial form of the questionnaire and trying it with parents included: undergraduates Anne Spillane, Michelle Cerny, Sarah Burger, Amy Tsai and Kari Schaap, JoAnn Shih, Michael Natanzon as well as graduate students Sujin Yang and Yarden Kedar. The first version of the questionnaire, which incorporates VLL member input has been composed by María Blume, Anne Spillane and Barbara Lust in 2003. An expanded revision has been made by the Multilingual Questionnaire project team in 2004-2006: Michael Natanzon and Sujin Yang, with the assistance of participants in Cognitive Studies Research Workshop, Fall, 2005.

Comments on possible improvements to the questionnaire are welcome and will be incorporated wherever possible. (bcl4@cornell.edu; sy98@cornell.edu).

Constructed on July, 2003 "VLL Multilingualism Questionnaire for Parents"

1st Revision: November, 2004 "VLL Child Multilingualism Questionnaire"

2nd Revision: February, 2005 "VLL Child Multilingualism Questionnaire"

3rd Revision: April, 2005 "VLL Child Multilingualism Questionnaire"

4th Revision: June 20, 2005 "VLL Child Multilingualism Questionnaire"

5th Revision: October 21, 2005 "VLL Child Multilingualism Questionnaire"

6th Revision: November 15, 2005 "VLL Child Multilingualism Questionnaire"

7th Revision: March 7, 2006 "VLL Child Multilingualism Questionnaire"

8th Revision: April 14, 2006 "VLL Child Multilingualism Questionnaire"

9th Revision: June 20, 2006 "VLL Child Multilingualism Questionnaire"

10th Revision: August 15, 2006 "VLL Child Multilingualism Questionnaire"

11th Revision: October 21, 2006 "VLL Child Multilingualism Questionnaire"