



# Questionnaire

We would be grateful if you could give us the following background information to help us with our studies. Please feel free to leave any item blank if you feel you would prefer not to answer.

Child's Name: \_\_\_\_\_

Child's Birth Date: \_\_\_\_\_

Contact details of Parent: Name: \_\_\_\_\_  
email and/or telephone: \_\_\_\_\_

Is your child: Male <input type="checkbox"/> Female <input type="checkbox"/> ?	Please indicate the areas where your child has lived for significant periods (more than a year) of his/her life: e.g.: Place: <i>La Habana, Cuba</i> Dates: <i>1975-93</i> Place: <i>New York City, NY</i> Dates: <i>1993-99</i> Place: <i>Miami, FL</i> Dates: <i>2002-05</i>  Place: _____      Dates: _____ Place: _____      Dates: _____ Place: _____      Dates: _____ Place: _____      Dates: _____
Was s/he born in the USA? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If s/he was not born in the USA:  At what age did s/he move to the USA? _____ How long has s/he lived in the USA? _____ yrs.	

If your child is of Hispanic descent, what is his or her heritage background?

<input type="checkbox"/> Cuban <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Mexican <input type="checkbox"/> Nicaraguan <input type="checkbox"/> Argentinean <input type="checkbox"/> Venezuelan <input type="checkbox"/> Colombian	<input type="checkbox"/> Other Hispanic (please specify): _____  <input type="checkbox"/> Other non-Hispanic (please specify): _____
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## Language Upbringing:

Which of the following languages does your child speak? (Select all that apply and fill in the blanks)

Spanish  
S/he began speaking Spanish (a)  as a baby, (b)  by age 2 (c)  between 3 & 5 years of age, (d)  in grade school, (e)  later, around age \_\_\_\_\_.

English  
S/he began speaking English (a)  as a baby, (b)  by age 2 (c)  between 3 & 5 years of age, (d)  in grade school, (e)  later, around age \_\_\_\_\_.

Other language(s): \_\_\_\_\_ S/he began speaking this language at around age: \_\_\_\_\_



What language(s) did the child’s mother and/or father speak to him or her at home from birth until the child turned about two years of age (if relevant)?

MOTHER	FATHER
<input type="checkbox"/> Virtually 100% English	<input type="checkbox"/> Virtually 100% English
<input type="checkbox"/> About 80% English, 20% Spanish	<input type="checkbox"/> About 80% English, 20% Spanish
<input type="checkbox"/> About 60% English, 40% Spanish	<input type="checkbox"/> About 60% English, 40% Spanish
<input type="checkbox"/> About 50% English, 50% Spanish	<input type="checkbox"/> About 50% English, 50% Spanish
<input type="checkbox"/> About 40% English, 60% Spanish	<input type="checkbox"/> About 40% English, 60% Spanish
<input type="checkbox"/> About 80% English, 20% Spanish	<input type="checkbox"/> About 80% English, 20% Spanish
<input type="checkbox"/> Virtually 100% Spanish	<input type="checkbox"/> Virtually 100% Spanish
<input type="checkbox"/> Other combination. Please specify: _____	<input type="checkbox"/> Other combination. Please specify: _____
<input type="checkbox"/> N/A	<input type="checkbox"/> N/A

What language(s) did the child’s mother/father speak to him or her at home when the child was around two to four years of age (if relevant)?

MOTHER	FATHER
<input type="checkbox"/> Virtually 100% English	<input type="checkbox"/> Virtually 100% English
<input type="checkbox"/> About 80% English, 20% Spanish	<input type="checkbox"/> About 80% English, 20% Spanish
<input type="checkbox"/> About 60% English, 40% Spanish	<input type="checkbox"/> About 60% English, 40% Spanish
<input type="checkbox"/> About 50% English, 50% Spanish	<input type="checkbox"/> About 50% English, 50% Spanish
<input type="checkbox"/> About 40% English, 60% Spanish	<input type="checkbox"/> About 40% English, 60% Spanish
<input type="checkbox"/> About 80% English, 20% Spanish	<input type="checkbox"/> About 80% English, 20% Spanish
<input type="checkbox"/> Virtually 100% Spanish	<input type="checkbox"/> Virtually 100% Spanish
<input type="checkbox"/> Other combination. Please specify: _____	<input type="checkbox"/> Other combination. Please specify: _____
<input type="checkbox"/> N/A	<input type="checkbox"/> N/A

What language(s) did the child’s mother/father speak to him/her at home when the child was just starting school (around five to six years of age) (if relevant)?

MOTHER	FATHER
<input type="checkbox"/> Virtually 100% English	<input type="checkbox"/> Virtually 100% English
<input type="checkbox"/> About 80% English, 20% Spanish	<input type="checkbox"/> About 80% English, 20% Spanish
<input type="checkbox"/> About 60% English, 40% Spanish	<input type="checkbox"/> About 60% English, 40% Spanish
<input type="checkbox"/> About 50% English, 50% Spanish	<input type="checkbox"/> About 50% English, 50% Spanish
<input type="checkbox"/> About 40% English, 60% Spanish	<input type="checkbox"/> About 40% English, 60% Spanish
<input type="checkbox"/> About 80% English, 20% Spanish	<input type="checkbox"/> About 80% English, 20% Spanish
<input type="checkbox"/> Virtually 100% Spanish	<input type="checkbox"/> Virtually 100% Spanish
<input type="checkbox"/> Other combination. Please specify: _____	<input type="checkbox"/> Other combination. Please specify: _____
<input type="checkbox"/> N/A	<input type="checkbox"/> N/A

What language(s) did the child’s parents speak to him/her at home when the child was in early primary school (seven to eight years of age) (if relevant)?

MOTHER	FATHER
<input type="checkbox"/> Virtually 100% English	<input type="checkbox"/> Virtually 100% English
<input type="checkbox"/> About 80% English, 20% Spanish	<input type="checkbox"/> About 80% English, 20% Spanish
<input type="checkbox"/> About 60% English, 40% Spanish	<input type="checkbox"/> About 60% English, 40% Spanish
<input type="checkbox"/> About 50% English, 50% Spanish	<input type="checkbox"/> About 50% English, 50% Spanish
<input type="checkbox"/> About 40% English, 60% Spanish	<input type="checkbox"/> About 40% English, 60% Spanish
<input type="checkbox"/> About 80% English, 20% Spanish	<input type="checkbox"/> About 80% English, 20% Spanish
<input type="checkbox"/> Virtually 100% Spanish	<input type="checkbox"/> Virtually 100% Spanish
<input type="checkbox"/> Other combination. Please specify: _____	<input type="checkbox"/> Other combination. Please specify: _____
<input type="checkbox"/> N/A	<input type="checkbox"/> N/A



What language(s) did the child's mother/father speak to him/her at home when the child was around **nine to twelve years of age** (if relevant)?

MOTHER	FATHER
<input type="checkbox"/> Virtually 100% English	<input type="checkbox"/> Virtually 100% English
<input type="checkbox"/> About 80% English, 20% Spanish	<input type="checkbox"/> About 80% English, 20% Spanish
<input type="checkbox"/> About 60% English, 40% Spanish	<input type="checkbox"/> About 60% English, 40% Spanish
<input type="checkbox"/> About 50% English, 50% Spanish	<input type="checkbox"/> About 50% English, 50% Spanish
<input type="checkbox"/> About 40% English, 60% Spanish	<input type="checkbox"/> About 40% English, 60% Spanish
<input type="checkbox"/> About 80% English, 20% Spanish	<input type="checkbox"/> About 80% English, 20% Spanish
<input type="checkbox"/> Virtually 100% Spanish	<input type="checkbox"/> Virtually 100% Spanish
<input type="checkbox"/> Other combination. Please specify: _____	<input type="checkbox"/> Other combination. Please specify: _____
<input type="checkbox"/> N/A	<input type="checkbox"/> N/A

What language(s) did **the child** speak to his/her mother and/or father before s/he began school?

MOTHER	FATHER
<input type="checkbox"/> Virtually 100% English	<input type="checkbox"/> Virtually 100% English
<input type="checkbox"/> About 80% English, 20% Spanish	<input type="checkbox"/> About 80% English, 20% Spanish
<input type="checkbox"/> About 60% English, 40% Spanish	<input type="checkbox"/> About 60% English, 40% Spanish
<input type="checkbox"/> About 50% English, 50% Spanish	<input type="checkbox"/> About 50% English, 50% Spanish
<input type="checkbox"/> About 40% English, 60% Spanish	<input type="checkbox"/> About 40% English, 60% Spanish
<input type="checkbox"/> About 80% English, 20% Spanish	<input type="checkbox"/> About 80% English, 20% Spanish
<input type="checkbox"/> Virtually 100% Spanish	<input type="checkbox"/> Virtually 100% Spanish
<input type="checkbox"/> Other combination. Please specify: _____	<input type="checkbox"/> Other combination. Please specify: _____
<input type="checkbox"/> N/A	<input type="checkbox"/> N/A

What language(s) did **the child** speak to his/her mother and/or father after s/he began school?

MOTHER	FATHER
<input type="checkbox"/> Virtually 100% English	<input type="checkbox"/> Virtually 100% English
<input type="checkbox"/> About 80% English, 20% Spanish	<input type="checkbox"/> About 80% English, 20% Spanish
<input type="checkbox"/> About 60% English, 40% Spanish	<input type="checkbox"/> About 60% English, 40% Spanish
<input type="checkbox"/> About 50% English, 50% Spanish	<input type="checkbox"/> About 50% English, 50% Spanish
<input type="checkbox"/> About 40% English, 60% Spanish	<input type="checkbox"/> About 40% English, 60% Spanish
<input type="checkbox"/> About 80% English, 20% Spanish	<input type="checkbox"/> About 80% English, 20% Spanish
<input type="checkbox"/> Virtually 100% Spanish	<input type="checkbox"/> Virtually 100% Spanish
<input type="checkbox"/> Other combination. Please specify: _____	<input type="checkbox"/> Other combination. Please specify: _____
<input type="checkbox"/> N/A	<input type="checkbox"/> N/A

What language(s) does **the child's younger/older siblings** speak to him/her (if applicable)?

YOUNGER	OLDER
<input type="checkbox"/> Virtually 100% English	<input type="checkbox"/> Virtually 100% English
<input type="checkbox"/> About 80% English, 20% Spanish	<input type="checkbox"/> About 80% English, 20% Spanish
<input type="checkbox"/> About 60% English, 40% Spanish	<input type="checkbox"/> About 60% English, 40% Spanish
<input type="checkbox"/> About 50% English, 50% Spanish	<input type="checkbox"/> About 50% English, 50% Spanish
<input type="checkbox"/> About 40% English, 60% Spanish	<input type="checkbox"/> About 40% English, 60% Spanish
<input type="checkbox"/> About 80% English, 20% Spanish	<input type="checkbox"/> About 80% English, 20% Spanish
<input type="checkbox"/> Virtually 100% Spanish	<input type="checkbox"/> Virtually 100% Spanish
<input type="checkbox"/> Other combination. Please specify: _____	<input type="checkbox"/> Other combination. Please specify: _____
<input type="checkbox"/> N/A	<input type="checkbox"/> N/A



What language(s) does **the child** speak to **younger/older sibling(s)** (if applicable)?

CHILD TO YOUNGER SIBLINGS	CHILD TO OLDER SIBLINGS
<input type="checkbox"/> Virtually 100% English <input type="checkbox"/> About 80% English, 20% Spanish <input type="checkbox"/> About 60% English, 40% Spanish <input type="checkbox"/> About 50% English, 50% Spanish <input type="checkbox"/> About 40% English, 60% Spanish <input type="checkbox"/> About 80% English, 20% Spanish <input type="checkbox"/> Virtually 100% Spanish <input type="checkbox"/> Other combination. Please specify: _____ <input type="checkbox"/> N/A	<input type="checkbox"/> Virtually 100% English <input type="checkbox"/> About 80% English, 20% Spanish <input type="checkbox"/> About 60% English, 40% Spanish <input type="checkbox"/> About 50% English, 50% Spanish <input type="checkbox"/> About 40% English, 60% Spanish <input type="checkbox"/> About 80% English, 20% Spanish <input type="checkbox"/> Virtually 100% Spanish <input type="checkbox"/> Other combination. Please specify: _____ <input type="checkbox"/> N/A

Are there any other significant adult(s) (grandparents, aunts, uncles...) with whom the child has frequent contact?  Yes  No

If yes, please answer the following for each:

<b>ADULT 1:</b> Please specify his/her relation to your child: _____ What language(s) does this person speak to your child? <input type="checkbox"/> Always English <input type="checkbox"/> Always Spanish <input type="checkbox"/> Sometimes English, sometimes Spanish	How often does your child see this person? <input type="checkbox"/> Every day <input type="checkbox"/> At least once a week <input type="checkbox"/> About once a month <input type="checkbox"/> Once or twice a year or so <input type="checkbox"/> Less often
<b>ADULT 2:</b> Please specify his/her relation to your child: _____ What language(s) does this person speak to your child? <input type="checkbox"/> Always English <input type="checkbox"/> Always Spanish <input type="checkbox"/> Sometimes English, sometimes Spanish	How often does your child see this person? <input type="checkbox"/> Every day <input type="checkbox"/> At least once a week <input type="checkbox"/> About once a month <input type="checkbox"/> Once or twice a year or so <input type="checkbox"/> Less often

What was the normal **language of instruction** in the **primary and secondary schools** your child attends (if relevant)?

PRIMARY SCHOOL	SECONDARY SCHOOL
<input type="checkbox"/> Virtually 100% English <input type="checkbox"/> About 80% English, 20% Spanish <input type="checkbox"/> About 60% English, 40% Spanish <input type="checkbox"/> About 50% English, 50% Spanish <input type="checkbox"/> About 40% English, 60% Spanish <input type="checkbox"/> About 80% English, 20% Spanish <input type="checkbox"/> Virtually 100% Spanish <input type="checkbox"/> Other combination. Please specify: _____ <input type="checkbox"/> N/A	<input type="checkbox"/> Virtually 100% English <input type="checkbox"/> About 80% English, 20% Spanish <input type="checkbox"/> About 60% English, 40% Spanish <input type="checkbox"/> About 50% English, 50% Spanish <input type="checkbox"/> About 40% English, 60% Spanish <input type="checkbox"/> About 80% English, 20% Spanish <input type="checkbox"/> Virtually 100% Spanish <input type="checkbox"/> Other combination. Please specify: _____ <input type="checkbox"/> N/A



<b>What language(s) does your child speak at primary school with classmates when <u>outside of the classroom</u>?</b>	<b>Overall, what language(s) does your child speak with most of his or her friends?</b>
<input type="checkbox"/> Virtually 100% English <input type="checkbox"/> About 80% English, 20% Spanish <input type="checkbox"/> About 60% English, 40% Spanish <input type="checkbox"/> About 50% English, 50% Spanish <input type="checkbox"/> About 40% English, 60% Spanish <input type="checkbox"/> About 80% English, 20% Spanish <input type="checkbox"/> Virtually 100% Spanish <input type="checkbox"/> Other combination. Please specify: _____ <input type="checkbox"/> N/A	<input type="checkbox"/> Virtually 100% English <input type="checkbox"/> About 80% English, 20% Spanish <input type="checkbox"/> About 60% English, 40% Spanish <input type="checkbox"/> About 50% English, 50% Spanish <input type="checkbox"/> About 40% English, 60% Spanish <input type="checkbox"/> About 80% English, 20% Spanish <input type="checkbox"/> Virtually 100% Spanish <input type="checkbox"/> Other combination. Please specify: _____ <input type="checkbox"/> N/A

<b>How important is it <u>to your child</u> to know Spanish?</b> <input type="checkbox"/> Extremely important <input type="checkbox"/> Very important <input type="checkbox"/> Somewhat important <input type="checkbox"/> Not important	<b>How important is it <u>for you</u> that your child learn Spanish?</b> <input type="checkbox"/> Extremely important <input type="checkbox"/> Very important <input type="checkbox"/> Somewhat important <input type="checkbox"/> Not important
<b>How important is it <u>to your child</u> to know English?</b> <input type="checkbox"/> Extremely important <input type="checkbox"/> Very important <input type="checkbox"/> Somewhat important <input type="checkbox"/> Not important	<b>How important was it <u>for you</u> that your child learn English?</b> <input type="checkbox"/> Extremely important <input type="checkbox"/> Very important <input type="checkbox"/> Somewhat important <input type="checkbox"/> Not important

## General information

Please indicate the level of education completed by the child's **mother**:

- Primary education (Grade School)
- Secondary education (High School)
- University or college education up to year \_\_\_\_\_ or degree: \_\_\_\_\_  
Major: \_\_\_\_\_
- Post-graduate education up to year \_\_\_\_\_ or degree: \_\_\_\_\_
- None of the above

Please indicate the level of education completed by the child's **father**:

- Primary education (Grade School)
- Secondary education (High School)
- University or college education up to year \_\_\_\_\_ or degree: \_\_\_\_\_  
Major: \_\_\_\_\_
- Post-graduate education up to year \_\_\_\_\_ or degree: \_\_\_\_\_
- None of the above

What is the child's mother's occupation (or if retired or unemployed, what was your last occupation before retiring or becoming unemployed)? \_\_\_\_\_

What is the child's father's occupation (if applicable)? \_\_\_\_\_



Has your child ever undergone speech or language therapy?

- Yes
- No

Has your child ever been treated for a hearing problem?

- Yes
- No

Has your child ever been treated for a vision problem?

- Yes
- No

Has your child ever been treated for Amblyopia?

- Yes
- No
- I don't know what that is

Does your child use bifocal or multifocal transitional glasses?

- Yes
- No

*Thank you very much for your time and co-operation*