

About you and your hobbies

The first questions are about things that some children like to do. Please tick one answer at each question.

1 How much do you like listening to or playing music?

I like it a lot

I like it a bit

I don't like it

2 How much do you like watching television, videos or DVDs?

I like it a lot

I like it a bit

I don't like it

3 How much do you like drawing, painting or making things?

I like it a lot

I like it a bit

I don't like it

4 How much do you like using a computer or playing games like X-Box or Playstation?

I like it a lot

I like it a bit

I don't like it

5 How much do you like playing sports and games outside?

I like it a lot

I like it a bit

I don't like it

6 How much do you like playing sports and games inside?

I like it a lot

I like it a bit

I don't like it

About you and your friends

Now some questions about your friends. Please tick one answer at each question.

7 How many friends do you have?

Lots

Some

Not many

8 Are your friends mostly boys, mostly girls or a mixture of boys and girls?

Mostly boys

Mostly girls

A mixture of boys and girls

9 Do you have any best friends?

Yes

No

10 How much do you like playing with your friends?

I like it a lot

I like it a bit

I don't like it

About you and how you feel

The next questions are about how you feel. Everyone has times when they feel happy, sad or angry. Please tick one answer at each question.

11 How often do you feel happy?

All of the time

Some of the time

Never

12 How often do you get worried?

All of the time

Some of the time

Never

13 How often do you feel sad?

All of the time

Some of the time

Never

14 How often are you quiet?

All of the time

Some of the time

Never

15 How often do you like to be alone?

All of the time

Some of the time

Never

16 How often do you laugh?

All of the time

Some of the time

Never

17 How often do you lose your temper?

All of the time

Some of the time

Never

18 How often do you get along well with your brother(s) or sister(s)?

All of the time

Some of the time

Never

I haven't got brothers or sisters

19 How often do you have fun with your family at the weekends?

All of the time

Some of the time

Never

20 What do you do if you are worried about something?

You can tick more than one answer if you like.

I keep it to myself

I tell a friend

I tell someone at home

I tell a teacher

About you and your school

These questions are about your school. Look at each question and tick the answer that best fits how you feel about school. Please tick one answer at each question.

21 How much do you like school?

I like it a lot

I like it a bit

I don't like it

22 How much do you like reading?

I like it a lot

I like it a bit

I don't like it

23 How much do you like doing number work?

I like it a lot

I like it a bit

I don't like it

24 How much do you like science?

I like it a lot

I like it a bit

I don't like it

25 How much do you like PE?

I like it a lot

I like it a bit

I don't like it

26 How much do you like answering questions in class?

I like it a lot

I like it a bit

I don't like it

27 How often do you try to do your best at school?

All of the time

Some of the time

Never

28 How often do you feel safe in the playground?

All of the time

Some of the time

Never

29 How often does your teacher think you are clever?

All of the time

Some of the time

Never

30 How often do you behave well in class?

All of the time

Some of the time

Never

31 How often is school interesting?

All of the time

Some of the time

Never

32 How often do you feel unhappy at school?

All of the time

Some of the time

Never

33 How often do you get tired at school?

All of the time

Some of the time

Never

- 34 How often do you get fed up at school?
- All of the time
- Some of the time
- Never
- 35 How often do you talk to your friends when you should be doing your work?
- All of the time
- Some of the time
- Never
- 36 How often do other children bully you?
- All of the time
- Some of the time
- Never
- 37 How often are you horrible to other children at school?
- All of the time
- Some of the time
- Never
- 38 How often do you feel left out of things by other children at school?
- All of the time
- Some of the time
- Never
- 39 And finally, when you grow up, what would you like to be?

Please give this booklet to the interviewer when you have finished answering the questions.

Thank you for helping us