

YOUNG LIVES SCHOOL SURVEY

VIETNAM ROUND 1 – WAVE 2 (2012)

CLASS ROSTER

Please refer to accompanying justification documents for further details on the development and use of the Young Lives school survey questionnaires.

CLASS ROSTER

YOUNG LIVES SCHOOL CODE: _____ CLASS: **5** TEACHER ID: _____

Has teacher changed since first round? (01=Yes; 00=No) [__ __]

How many days has the teacher been absent this academic year? (enter total e.g. 005) [__ __ __] (-88 if teacher changed)

1. PUPIL ID	2. Is this child a Young Lives child? 00=No; 01=Yes	3. If YES, please insert YL Child ID and name <u>If NO, please write the name of the non-YL child</u>	4. COMPLETE THIS SECTION WITH THE HELP OF THE TEACHER AND CLASS REGISTER		
			4.1 Is child still enrolled in class? 00=No; 01=Yes	4.2 If child is no longer enrolled in this class, why? 01=dropped out of school; 02= moved to another class; 03=moved to another school; 04=not known <i>(if still in class enter -88)</i>	4.3 How many days has the pupil been absent this academic year? <i>(if no longer in class enter -88)</i>
CH01	[__]		[__]	[__]	[__]
CH02	[__]		[__]	[__]	[__]
CH03	[__]		[__]	[__]	[__]
CH04	[__]		[__]	[__]	[__]
CH05	[__]		[__]	[__]	[__]
CH06	[__]		[__]	[__]	[__]
CH07	[__]		[__]	[__]	[__]
CH08	[__]		[__]	[__]	[__]
CH09	[__]		[__]	[__]	[__]
CH10	[__]		[__]	[__]	[__]
CH11	[__]		[__]	[__]	[__]
CH12	[__]		[__]	[__]	[__]
CH13	[__]		[__]	[__]	[__]
CH14	[__]		[__]	[__]	[__]
CH15	[__]		[__]	[__]	[__]
CH16	[__]		[__]	[__]	[__]
CH17	[__]		[__]	[__]	[__]
CH18	[__]		[__]	[__]	[__]
CH19	[__]		[__]	[__]	[__]
CH20	[__]		[__]	[__]	[__]

1. How would you describe your friendship with this classmate? PLEASE ONLY MARK ONE COLUMN FOR EACH FRIEND

Child name	Very close friends (03)	Close friends (02)	A little/ sometimes friends (01)	Not close friends (00)
Example	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH01</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH02</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH03</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH04</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH05</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH06</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH07</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH08</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH09</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH10</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH11</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH12</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH13</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH14</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH15</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH16</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH17</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH18</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH19</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH20</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. How much do you do things with this classmate outside of school? PLEASE ONLY MARK ONE COLUMN FOR EACH FRIEND

Child name	A lot (03)	Quite a lot (02)	Not very much (01)	None (00)
Example	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH01</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH02</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH03</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH04</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH05</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH06</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH07</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH08</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH09</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH10</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH11</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH12</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH13</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH14</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH15</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH16</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH17</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH18</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH19</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CH20</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>