

Curricular Reform Study in Thuringia
Parents
Main Study 2009/10 (A70)
PAPI questionnaire



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ON THE REFORM OF THE UPPER SECONDARY LEVEL IN THURINGIA

Next year (i.e. school year 2010/2011), secondary school graduates will have completed the reformed upper secondary level for the first time in Thuringia. The reform will involve a number of changes in terms of the range of compulsory learning subjects offered.

Your child is in the last age group prior to the reform and, thus, will not be affected by the so-called “new upper secondary level”.

1 How much do you know about the differences between the “old” and the “new” upper secondary level?	
<i>Please check only one answer</i>	
very little	<input type="checkbox"/> → <i>please continue with question 4</i>
little	<input type="checkbox"/>
much	<input type="checkbox"/>
very much	<input type="checkbox"/>

2 How do you rate the reform of the upper secondary level?					
<i>Please check only one answer</i>					
	strong negative effects	slight negative effects	no effects	slight positive effects	strong positive effects
Reform of the upper secondary level on the whole	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3 How will the reform of the upper secondary level affect the following aspects in your opinion?						
<i>Please check one box in each line</i>						
		strong negative effects	slight negative effects	no effects	slight positive effects	strong positive effects
a)	Proficiency level of the students on the whole	<input type="checkbox"/>				
b)	Motivation of the students on the whole	<input type="checkbox"/>				
c)	Preparation for the academic subject selection	<input type="checkbox"/>				
d)	Preparation for the requirements of the academic studies	<input type="checkbox"/>				
e)	Comparability of the high school-leaving grade across different schools	<input type="checkbox"/>				
f)	Suitability of the high school-leaving grade as an indicator for scholastic aptitude	<input type="checkbox"/>				

4 What is your opinion about the introduction of <u>mathematics</u> as a core subject (with 4 hours per week compared to 4 and/or 6 hours per week in the basic and/or advanced course prior to the reform) relative to the following aspects?						
<i>Please check one box in each line</i>						
		strong negative effects	slight negative effects	no effects	slight positive effects	strong positive effects
a)	Medium proficiency level in mathematics	<input type="checkbox"/>				
b)	Securing a minimum proficiency level in mathematics	<input type="checkbox"/>				
c)	Promotion of students with very good grades in mathematics	<input type="checkbox"/>				
d)	Reduction of differences between students with a high and those with a low proficiency level in mathematics	<input type="checkbox"/>				

Question 4 continued					
What is your opinion about the introduction of <u>mathematics</u> as a core subject (with 4 hours per week compared to 4 and/or 6 hours per week in the basic and/or advanced course prior to the reform) relative to the following aspects?					
<i>Please check one box in each line</i>					
	strong negative effects	slight negative effects	no effects	slight positive effects	strong positive effects
e) Willingness of the students to make efforts in mathematics	<input type="checkbox"/>				
f) Interest shown by students in mathematics	<input type="checkbox"/>				
g) Promotion of students with a lower proficiency level in mathematics	<input type="checkbox"/>				

5 What is your opinion about the introduction of <u>English</u> as a core subject (with 4 hours per week compared to 4 and/or 6 hours per week in the basic and/or advanced course prior to the reform) relative to the following aspects?					
<i>Please check one box in each line</i>					
	strong negative effects	slight negative effects	no effects	slight positive effects	strong positive effects
a) Medium proficiency level in English	<input type="checkbox"/>				
b) Securing a minimum proficiency level in English	<input type="checkbox"/>				
c) Promotion of students with very good grades in English	<input type="checkbox"/>				
d) Reduction of differences between students with a high and those with a low proficiency level in English	<input type="checkbox"/>				
e) Willingness of the students to make efforts in English	<input type="checkbox"/>				
f) Interest shown by students in English	<input type="checkbox"/>				
g) Promotion of students with a lower proficiency level in English	<input type="checkbox"/>				

6 In the reformed upper secondary level, all students are required to select one field of <u>natural science</u> (physics, chemistry or biology) as a subject with an "increased level of requirement" (4 hours per week). What is your opinion regarding the following aspects?						
<i>Please check one box in each line</i>						
		strong negative effects	slight negative effects	no effects	slight positive effects	strong positive effects
a)	Medium proficiency level in natural sciences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b)	Securing a minimum proficiency level in natural sciences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c)	Promotion of students with very good grades in natural sciences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d)	Reduction of differences between students with a high and those with a low proficiency level in natural sciences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e)	Willingness of the students to make efforts in natural sciences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f)	Interest shown by students in natural sciences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g)	Promotion of students with a lower proficiency level in natural sciences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7 In the reformed upper secondary level, all students are required to take examinations in five instead of four examination subjects. In your opinion, how will this affect ...					
<i>Please check one box in each line.</i>					
	will drop strongly	will drop slightly	no change	will rise slightly	will rise strongly
a) ... the psychological stress on the high school graduates?	<input type="checkbox"/>				
b) ... the general education level of the high school graduates?	<input type="checkbox"/>				
c) ... the possibility of developing own focus of interest?	<input type="checkbox"/>				
d) ... the willingness to learn in non-examination subjects?	<input type="checkbox"/>				
e) ... the quality of preparation for the academic studies?	<input type="checkbox"/>				
f) ... the comparability of the high school-leaving certificate?	<input type="checkbox"/>				

ON YOUR DAUGHTER/YOUR SON

8 To what extent are you satisfied with your daughter's/son's performance in school?				
<i>Please check only once answer</i>				
	very unsatisfied	rather unsatisfied	rather satisfied	very satisfied
With my daughter's/son's performance at school, I am ...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9 What occupation should your daughter/son choose in your opinion?
<i>Please state what you think and not what your daughter/son is aiming for</i>
 <hr/> <i>Please enter in block letters</i>

10 How well are you informed about the question of how many hours of teaching your child receives in what subjects?								
<i>Please check only one answer</i>								
<table style="width: 100%; text-align: center;"> <tr> <td>very little</td> <td>rather little</td> <td>rather well</td> <td>very well</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	very little	rather little	rather well	very well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
very little	rather little	rather well	very well					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					

11 How do you rate the school's performance requirements to be met by your daughter/son ...																								
<i>Please check one box in each line</i>																								
<table style="width: 100%; text-align: center;"> <tr> <td></td> <td>much too low</td> <td>too low</td> <td>just right</td> <td>too great</td> <td>much too great</td> </tr> <tr> <td>a) ... in class?</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>b) ... during homework?</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>c) ... during performance checks in class (e.g. written tests)?</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>		much too low	too low	just right	too great	much too great	a) ... in class?	<input type="checkbox"/>	b) ... during homework?	<input type="checkbox"/>	c) ... during performance checks in class (e.g. written tests)?	<input type="checkbox"/>												
	much too low	too low	just right	too great	much too great																			
a) ... in class?	<input type="checkbox"/>																							
b) ... during homework?	<input type="checkbox"/>																							
c) ... during performance checks in class (e.g. written tests)?	<input type="checkbox"/>																							

12 How do you rate the school's time requirements to be met by your daughter/son?																								
<i>Please check one box in each line</i>																								
<table style="width: 100%; text-align: center;"> <tr> <td></td> <td>much too low</td> <td>too low</td> <td>just right</td> <td>too great</td> <td>much too great</td> </tr> <tr> <td>a) Weekly teaching time</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>b) Time for homework</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>c) Time for learning (time required for preparation and subsequent evaluation of the teaching subject without homework)</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>		much too low	too low	just right	too great	much too great	a) Weekly teaching time	<input type="checkbox"/>	b) Time for homework	<input type="checkbox"/>	c) Time for learning (time required for preparation and subsequent evaluation of the teaching subject without homework)	<input type="checkbox"/>												
	much too low	too low	just right	too great	much too great																			
a) Weekly teaching time	<input type="checkbox"/>																							
b) Time for homework	<input type="checkbox"/>																							
c) Time for learning (time required for preparation and subsequent evaluation of the teaching subject without homework)	<input type="checkbox"/>																							

18 In what country were you born?		
<i>Only one answer for each person</i>		
	mother	father
a) Germany	<input type="checkbox"/>	<input type="checkbox"/>
b) Vietnam	<input type="checkbox"/>	<input type="checkbox"/>
c) Russian Federation	<input type="checkbox"/>	<input type="checkbox"/>
d) Turkey	<input type="checkbox"/>	<input type="checkbox"/>
e) Azerbaijan	<input type="checkbox"/>	<input type="checkbox"/>
f) Ukraine	<input type="checkbox"/>	<input type="checkbox"/>
g) Serbia	<input type="checkbox"/>	<input type="checkbox"/>
h) Kazakhstan	<input type="checkbox"/>	<input type="checkbox"/>
i) Armenia	<input type="checkbox"/>	<input type="checkbox"/>
j) Iraq	<input type="checkbox"/>	<input type="checkbox"/>
k) Poland	<input type="checkbox"/>	<input type="checkbox"/>
l) China	<input type="checkbox"/>	<input type="checkbox"/>
m) Italy	<input type="checkbox"/>	<input type="checkbox"/>
n) Other, namely:	<input type="checkbox"/>	<input type="checkbox"/>
Mother 	_____	
	<i>Please enter in block letters</i>	
Father 	_____	
	<i>Please enter in block letters</i>	

19 What is your nationality?		
<i>If you have more than one nationality, you may check more answers. Check where applicable</i>		
	mother	father
a) German	<input type="checkbox"/>	<input type="checkbox"/>
b) Vietnamese	<input type="checkbox"/>	<input type="checkbox"/>
c) Russian	<input type="checkbox"/>	<input type="checkbox"/>
d) Turkish	<input type="checkbox"/>	<input type="checkbox"/>
e) Azerbaijani	<input type="checkbox"/>	<input type="checkbox"/>
f) Ukrainian	<input type="checkbox"/>	<input type="checkbox"/>
g) Serbian	<input type="checkbox"/>	<input type="checkbox"/>

Question 19 continued		
What nationality do you have?		
<i>If you have more than one nationality, you may check more answers. Check where applicable</i>		
	mother	father
h) Kazakh	<input type="checkbox"/>	<input type="checkbox"/>
i) Armenian	<input type="checkbox"/>	<input type="checkbox"/>
j) Iraqi	<input type="checkbox"/>	<input type="checkbox"/>
k) Polish	<input type="checkbox"/>	<input type="checkbox"/>
l) Chinese	<input type="checkbox"/>	<input type="checkbox"/>
m) Italian	<input type="checkbox"/>	<input type="checkbox"/>
n) Other, namely:	<input type="checkbox"/>	<input type="checkbox"/>
Mother 	_____	
	<i>Please enter in block letters</i>	
Father 	_____	
	<i>Please enter in block letters</i>	

20 What is your highest general education school-leaving certificate?		
<i>Please check where applicable</i>		
	mother	father
No school-leaving certificate	<input type="checkbox"/>	<input type="checkbox"/>
Secondary modern school/elementary school-leaving certificate, 8th grade POS	<input type="checkbox"/>	<input type="checkbox"/>
GCE ordinary level, intermediate school-leaving certificate 10 th grade POS	<input type="checkbox"/>	<input type="checkbox"/>
vocational diploma/high school diploma, 12th grade EOS	<input type="checkbox"/>	<input type="checkbox"/>
Other school-leaving diplomas	<input type="checkbox"/>	<input type="checkbox"/>

21 Have you acquired your highest school-leaving certificate in Germany?	
<i>Please note that this does not refer to vocational training certificates such as apprenticeship or university education, but school-leaving diplomas such as high school diploma. Please check as applicable</i>	
yes	<input type="checkbox"/>
no	<input type="checkbox"/>

22 What is your highest vocational training certificate?		
<i>Please state your highest certificate only</i>		
	mother	father
a) Apprenticeship certificate (commercial, operational, industrial, agricultural) journeyman's or assistant's certificate, dual training, GDR: skilled worker's certificate	<input type="checkbox"/>	<input type="checkbox"/>
b) Master craftsman certificate, technician's training certificate	<input type="checkbox"/>	<input type="checkbox"/>
c) Civil servant training (career examination): subclerical class	<input type="checkbox"/>	<input type="checkbox"/>
d) Civil servant training (career examination): clerical class	<input type="checkbox"/>	<input type="checkbox"/>
e) Civil servant training (career examination): executive class	<input type="checkbox"/>	<input type="checkbox"/>
f) Civil servant training (career examination): administrative class	<input type="checkbox"/>	<input type="checkbox"/>
g) Certificate of a public health school	<input type="checkbox"/>	<input type="checkbox"/>
h) Vocational school certificate, commercial school certificate	<input type="checkbox"/>	<input type="checkbox"/>
i) Technical school certificate (also vocational academy certificate)	<input type="checkbox"/>	<input type="checkbox"/>
j) Technical school certificate in the GDR	<input type="checkbox"/>	<input type="checkbox"/>
k) Bachelor (e.g. B.A., B.Sc.)	<input type="checkbox"/>	<input type="checkbox"/>
l) Diplom [Diploma], Master (M.A.)	<input type="checkbox"/>	<input type="checkbox"/>
m) Magister [equivalent to Master in the pre-Bologna system], state examination	<input type="checkbox"/>	<input type="checkbox"/>
n) Doctorate, habilitation	<input type="checkbox"/>	<input type="checkbox"/>
o) Vocational academy certificate	<input type="checkbox"/>	<input type="checkbox"/>
p) Certificate of a university of applied administrative sciences	<input type="checkbox"/>	<input type="checkbox"/>
q) Technical college certificate (former school of engineering)	<input type="checkbox"/>	<input type="checkbox"/>

Question 22 continued		
What is your highest vocational training certificate?		
<i>Please state your highest certificate only</i>		
	mother	father
r) University education certificate	<input type="checkbox"/>	<input type="checkbox"/>
s) GDR: incomplete skilled worker's certificate in a trade	<input type="checkbox"/>	<input type="checkbox"/>
t) No vocational training certificate	<input type="checkbox"/>	<input type="checkbox"/>
u) Other, namely:	<input type="checkbox"/>	<input type="checkbox"/>
Mother 	_____	
	<i>Please enter in block letters</i>	
Father 	_____	
	<i>Please enter in block letters</i>	

23 If you have stated Bachelor, Diploma or Master as the highest vocational training certificate: At what educational facility did you earn this certificate?		
<i>Please check only one box in each column</i>		
	mother	father
a) At a vocational academy	<input type="checkbox"/>	<input type="checkbox"/>
b) At a university of applied administrative sciences	<input type="checkbox"/>	<input type="checkbox"/>
c) At a university of applied sciences and/or former school of engineering	<input type="checkbox"/>	<input type="checkbox"/>
d) At a university (also technical, medical, religious, teacher training or veterinary college, college of music or art)	<input type="checkbox"/>	<input type="checkbox"/>
e) Other facility	<input type="checkbox"/>	<input type="checkbox"/>

24 Are you currently working full or part-time, spare time or non-active?

Notes: If one parent has two part-time jobs, please check "full-time employment". "Spare-time employment" means jobs with less than 15 hours per week. Please enter "non-active" for training process. Please check only one box in each column

	mother	father
a) Full-time employment	<input type="checkbox"/>	<input type="checkbox"/>
b) Part-time employment	<input type="checkbox"/>	<input type="checkbox"/>
c) Spare-time employment	<input type="checkbox"/>	<input type="checkbox"/>
d) Non-active	<input type="checkbox"/>	<input type="checkbox"/>
e) Gainful employment: How many hours do you normally work per week – including any spare-time employment?	<div style="border-bottom: 1px solid black; width: 50px; margin: 0 auto;"></div>	<div style="border-bottom: 1px solid black; width: 50px; margin: 0 auto;"></div>

25 If you do work spare-time or if you are non-active: What are your main activities at present?

Please check only one box in each column

	mother	father
a) Registered unemployed at the Federal Agency for Employment	<input type="checkbox"/>	<input type="checkbox"/>
b) Unemployed, but not registered unemployed at the Federal Agency for Employment	<input type="checkbox"/>	<input type="checkbox"/>
c) Working short-time	<input type="checkbox"/>	<input type="checkbox"/>
d) 1-Euro-job, ABM (job creation scheme), or similar measures of the Federal Agency for Employment/job center or ARGE	<input type="checkbox"/>	<input type="checkbox"/>
e) Partial retirement	<input type="checkbox"/>	<input type="checkbox"/>
f) General education schooling	<input type="checkbox"/>	<input type="checkbox"/>
g) Vocational training	<input type="checkbox"/>	<input type="checkbox"/>
h) Master craftsman or technician training, attending a master craftsman/technician school	<input type="checkbox"/>	<input type="checkbox"/>
i) Studies	<input type="checkbox"/>	<input type="checkbox"/>
j) Doctorate	<input type="checkbox"/>	<input type="checkbox"/>
k) Vocational retraining, advanced or further education	<input type="checkbox"/>	<input type="checkbox"/>
l) On maternity leave/parental leave	<input type="checkbox"/>	<input type="checkbox"/>
m) Housewife/househusband	<input type="checkbox"/>	<input type="checkbox"/>
n) Sick/temporarily unable to work	<input type="checkbox"/>	<input type="checkbox"/>
o) Pensioner/on (early) retirement	<input type="checkbox"/>	<input type="checkbox"/>
p) Military service/civilian alternative service, volunteer social, ecological, European year	<input type="checkbox"/>	<input type="checkbox"/>
q) Other	<input type="checkbox"/>	<input type="checkbox"/>
r) Not applicable	<input type="checkbox"/>	<input type="checkbox"/>

26 If you are and/or were gainfully employed: Please state your current and/or last professional activity.

If you are on part-time and/or full-time employment, please indicate your current professional activity. If you are on spare-time employment or if you are non-active, please indicate your last professional activity.

Please make sure that your information on professional activity is as accurate as possible (e.g. "precision mechanic", "automotive mechanic", "grammar school teacher in history"). For temporary work, please state the main professional activity. If you are engaged in several activities at the same time, please indicate the activity with the highest number of hours and/or – if the hours are identical – the activity with the highest income.

Mother  _____
 Please enter in block letters

Father  _____
 Please enter in block letters

27 What is and/or was your professional position?

If you are on part-time and/or full-time employment, please indicate your current professional position. If you are on spare-time employment or if you are non-active, please indicate your last professional activity.

For temporary work or seasonal work, please indicate your predominant position at the same employer.

Please check only one box in each column

	mother	father
Worker		
a) Unskilled worker	<input type="checkbox"/>	<input type="checkbox"/>
b) Semi-skilled worker, skilled worker with incomplete training in a branch of trade	<input type="checkbox"/>	<input type="checkbox"/>
c) Skilled worker, assistant	<input type="checkbox"/>	<input type="checkbox"/>
d) Foreman, group leader, team leader	<input type="checkbox"/>	<input type="checkbox"/>
e) Master craftsman, site foreman	<input type="checkbox"/>	<input type="checkbox"/>
Salaried Employee (also salaried public employee)		
f) Simple job (e.g. salesperson)	<input type="checkbox"/>	<input type="checkbox"/>
g) Qualified job (e.g. clerk, design draftsman)	<input type="checkbox"/>	<input type="checkbox"/>

Question 27 continued			
What is and/or was your professional position?			
<p><i>If you are on part-time and/or full-time employment, please indicate your current professional position. If you are on spare-time employment or if you are non-active, please indicate your last professional activity.</i></p> <p><i>For temporary work or seasonal work, please indicate your predominant position at the same employer.</i></p> <p><i>Please check only one box in each column</i></p>			
	mother	father	
h)	Highly qualified activity or executive function (e.g. civil engineer, scientific assistant, head of department)	<input type="checkbox"/>	<input type="checkbox"/>
i)	Activity involving executive tasks (e.g. director, general manager, board member)	<input type="checkbox"/>	<input type="checkbox"/>
j)	Industrial master craftsman and foreman	<input type="checkbox"/>	<input type="checkbox"/>
Civil servant (including judge)			
k)	Subclerical class (up to Oberamtsmeister inclusive)	<input type="checkbox"/>	<input type="checkbox"/>
l)	Clerical class (from assistant to Hauptsekretär and/or Amtsinspektor)	<input type="checkbox"/>	<input type="checkbox"/>
m)	Executive class (from Inspektor to Amtsrat and/or Oberamtsrat inclusive and elementary, secondary modern school or intermediate school teacher)	<input type="checkbox"/>	<input type="checkbox"/>
n)	Administrative class, judge (from Regierungsrat and higher, e.g. teacher from Studienrat)	<input type="checkbox"/>	<input type="checkbox"/>
Temporary-career volunteer/career soldier			
o)	Nonrated soldier	<input type="checkbox"/>	<input type="checkbox"/>
p)	Noncommissioned officer (junior noncommissioned officer, senior noncommissioned officer such as sergeant, staff sergeant)	<input type="checkbox"/>	<input type="checkbox"/>
q)	Officer/in (lieutenant, captain)	<input type="checkbox"/>	<input type="checkbox"/>
r)	Staff officer (from major)	<input type="checkbox"/>	<input type="checkbox"/>
Self-employed person			
s)	In a free profession	<input type="checkbox"/>	<input type="checkbox"/>
t)	In trade, commerce, industry, service sector	<input type="checkbox"/>	<input type="checkbox"/>
u)	Farmer	<input type="checkbox"/>	<input type="checkbox"/>
v)	Assisting family member	<input type="checkbox"/>	<input type="checkbox"/>
w)	Free-lance	<input type="checkbox"/>	<input type="checkbox"/>

28 If you are and/or were a self-employed person: How many employees do and/or did you have?

If you are on part-time and/or full-time employment, please indicate your current professional position. If you are on spare-time employment or if you are non-active, please indicate your last professional activity.

Please check only one box in each column.

	mother	father
a) None	<input type="checkbox"/>	<input type="checkbox"/>
b) Below 5	<input type="checkbox"/>	<input type="checkbox"/>
c) 5 to below 10	<input type="checkbox"/>	<input type="checkbox"/>
d) 10 to below 20	<input type="checkbox"/>	<input type="checkbox"/>
e) 20 to below 50	<input type="checkbox"/>	<input type="checkbox"/>
f) 50 to below 100	<input type="checkbox"/>	<input type="checkbox"/>
g) 100 to below 200	<input type="checkbox"/>	<input type="checkbox"/>
h) 200 to below 500	<input type="checkbox"/>	<input type="checkbox"/>
i) 500 to below 1,000	<input type="checkbox"/>	<input type="checkbox"/>
j) 1,000 to below 2.000	<input type="checkbox"/>	<input type="checkbox"/>
k) 2,000 and more	<input type="checkbox"/>	<input type="checkbox"/>

29 If you are and/or were *not* a self-employed person: Are and/or were you in a leading position?

If you are on spare-time employment or if you are non-active, please indicate your last professional activity.

Please check as applicable

	mother	father
no	<input type="checkbox"/>	<input type="checkbox"/>
yes	<input type="checkbox"/>	<input type="checkbox"/>
If so, how many staff are and/or were subordinate to you?		
	mother	father
0	<input type="checkbox"/>	<input type="checkbox"/>
1–2	<input type="checkbox"/>	<input type="checkbox"/>
3–9	<input type="checkbox"/>	<input type="checkbox"/>
10 and more	<input type="checkbox"/>	<input type="checkbox"/>

32 How do you rate the chances that your daughter/son once will be able to enter a profession with the following educational achievements that is as least respected as the mother's?

If the mother is current not gainfully employed, please think of your last professional activity. Please check one box in each line.

	very small	rather small	partly	rather great	very great	Mother was never gainfully employed.
a) With vocational education	<input type="checkbox"/>					
b) With academic studies	<input type="checkbox"/>					

33 How do you rate the chances that your daughter/son once will be able to enter a profession with the following educational achievements that is as least respected as the father's?

If the father is current not gainfully employed, please think of your last professional activity. Please check one box in each line.

	very small	rather small	partly	rather great	very great	Father was never gainfully employed.
a) With a vocational education	<input type="checkbox"/>					
b) With academic studies	<input type="checkbox"/>					

34 What vocational education would you like your daughter/son to get?

Please check only one answer

a) Industrial educational qualification (e.g. in trade, industry, commerce, administration, services sector)	<input type="checkbox"/>
b) School educational qualification (e.g. in the health care system, trained nurse)	<input type="checkbox"/>
c) Graduation from a vocational academy	<input type="checkbox"/>
d) Graduation from a university of applied sciences	<input type="checkbox"/>
e) Graduation from a university	<input type="checkbox"/>
f) Graduation from a teacher's college	<input type="checkbox"/>

35 If you consider all the things you currently know, what are the chances in your opinion that your child will actually achieve the following qualifications?

Please check one box in each line

	impossible				absolutely sure		
	1	2	3	4	5	6	7
a) Industrial educational qualification (e.g. in trade, industry, commerce, administration, services sector)	<input type="checkbox"/>						
b) School educational qualification (e.g. in the health care system, trained nurse)	<input type="checkbox"/>						
c) Graduation from a vocational academy	<input type="checkbox"/>						
d) Graduation from a university of applied sciences	<input type="checkbox"/>						
e) Graduation from a university	<input type="checkbox"/>						
f) Graduation from a teacher's college	<input type="checkbox"/>						

36 No matter what your daughter/son will do after she/he has left school, what do you think are the chances that she/he could ...

Please check one box in each line

	very unlikely	rather unlikely	partly	rather likely	very likely
a) ... achieve a professional qualification?	<input type="checkbox"/>				
b) ... achieve an academic qualification?	<input type="checkbox"/>				

39 Do you have at home for your daughter/son ...

Bitte in jeder Zeile ein Kästchen ankreuzen

	yes	no
a) ... a desk for learning?	<input type="checkbox"/>	<input type="checkbox"/>
b) ... a room for herself/himself?	<input type="checkbox"/>	<input type="checkbox"/>
c) ... a computer she/he can use for learning?	<input type="checkbox"/>	<input type="checkbox"/>
d) ... learning software?	<input type="checkbox"/>	<input type="checkbox"/>
e) ... classical literature (e.g. Goethe)?	<input type="checkbox"/>	<input type="checkbox"/>
f) ... books with poems?	<input type="checkbox"/>	<input type="checkbox"/>
g) ... works of art (e.g. pictures)?	<input type="checkbox"/>	<input type="checkbox"/>
h) ... books that are useful for homework?	<input type="checkbox"/>	<input type="checkbox"/>
i) ... a dictionary?	<input type="checkbox"/>	<input type="checkbox"/>

40 How important do you consider the following school subjects?

Please check one box in each line

	un- important	rather unimportant	rather important	very important
a) Mathematics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) German	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Biology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Chemistry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) History	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Physics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

41 What grades (score) achieved by your daughter/son would you only just be satisfied with?					
<i>Please check one box in each line</i>					
	1 (13-15 points)	2 (10-12 points)	3 (7-9 points)	4 (4-6 points)	5 (1-3 points)
a) Mathematics	<input type="checkbox"/>				
b) English	<input type="checkbox"/>				
c) German	<input type="checkbox"/>				
d) Biology	<input type="checkbox"/>				
e) Chemistry	<input type="checkbox"/>				
f) History	<input type="checkbox"/>				
g) Physics	<input type="checkbox"/>				

42 Who of you has completed the questionnaire?	
<i>Please check only one answer</i>	
mother	<input type="checkbox"/>
father	<input type="checkbox"/>
both	<input type="checkbox"/>
another person, namely:	<input type="checkbox"/>
 _____ <i>Please enter in block letters</i>	

Thank you
for completing the questionnaire.