

**AFRICAN POPULATION AND HEALTH RESEARCH CENTER****EDUCATION RESEARCH PROGRAMME****TEACHER QUESTIONNAIRE**

**THIS QUESTIONNAIRE SHOULD BE ADMINISTERED TO TEACHERS OF MATHEMATICS
IN CLASSES THREE & SIX IN THE SCHOOL VISITED**

In the process of developing this study tool, several sources were consulted and mainly included the Human Sciences and Research council (HSRC) and the South Africa Consortium for Monitoring and Evaluating Educational Quality II – Kenya (SACMEQ II).

1.0 BACKGROUND INFORMATION

- 1.1 START TIME
- 1.2 DATE OF INTERVIEW (DD/MM/YYYY)
- 1.3 FIELD INTERVIEWER'S (FI) CODE
- 1.4 FULL NAME OF THE TEACHER _____
- 1.4a TSC/EMPLOYMENT NUMBER
- 1.5 FULL NAME OF SCHOOL _____
- 1.6 CURRENT KENYA NATIONAL EXAMINATION INDEX FOR THE SCHOOL
- 1.7 PREVIOUS KENYA NATIONAL EXAMINATION INDEX FOR THE SCHOOL
- 1.8 FI: IN WHICH TOWN IS THE SCHOOL LOCATED?
- 01=NAIROBI; 02=MOMBASA; 03=NYERI; 04=NAKURU; 05=ELDORET; 06=KISUMU
- 1.9 FI: GIVE THE NAME OF THE TOWN WHERE THE SCHOOL IS LOCATED _____

1.10 INTRODUCTION AND CONSENT

Good morning/afternoon/evening sir/madam. My name is (NAME OF FIELD INTERVIEWER). I work with the African Population and Health Research Center (APHRC) which carries out research on education, Health, Urbanization, and Well being. The APHRC works in Kenya and in the sub-Saharan Africa region. Under the Education theme, we visit primary schools to collect data on school infrastructure, enrolment, staffing and management. This time round, we would like to collect data from [NAME OF SCHOOL] and we will be interviewing teachers handling classes three and six. From them, we seek data on their professional and academic training, subjects they teach at class three and six as well as involve them in correcting problems faced by standard three and six pupils in mathematics. The results of this research will be disseminated to schools participating in the study and at national level in order to inform education policy in Kenya.

Your responses will be held with utmost confidentiality and will only be available to members of the research team. Your responses will not cause any disadvantage to you or your school. If you accept to participate in this study, you will be doing so professionally and voluntarily and there will not be any monetary returns. Any benefits of the research will be policy oriented intended to improve the teaching and learning processes in our schools. You are free to ask questions as we proceed. You may also refuse to respond to questions you do not feel comfortable answering. This interview will take about 30 minutes.

- 1.11 Would you like to participate in this research? 1=YES; 2=NO; ☐
- [IF 1=YES, THANK THE RESPONDENT AND PROCEED TO SECTION 2.0]**
- 1.12 Kindly let me know the reason why you would not wish to participate in this research
- 01=TOO BUSY/DO NOT HAVE TIME; 02=TIRED OF RESEARCH; 03=RESEARCH NOT BENEFICIAL;
04=NOT INTERESTED; 06=OTHER (specify) _____
- [CHECK 1.11: IF 2=NO, THANK THE RESPONDENT, AND SKIP TO SECTION 6.0]**

2.0 SOME QUESTIONS ABOUT YOU

- 2.1 FI: INDICATE SEX OF TEACHER/RESPONDENT 1=FEMALE; 2=MALE ☐
- 2.2 What is the date of your birth? (DD/MM/YYYY)
- 2.2a What grade are you teaching Mathematics? 1=grade 3; 2=grade 6 ☐
- 2.3 What is the highest level of **academic education** you have attained?
- 01=PRIMARY EDUCATION; 02=JUNIOR SECONDARY EDUCATION;
03=SECONDARY EDUCATION (O-LEVEL); 04=SECONDARY EDUCATION (A-LEVEL);
05=BACHELOR'S DEGREE OR HIGHER (OTHER THAN BACHELOR OF EDUCATION)
06=OTHER (specify) _____

2.4	What is the highest level of certification of your pre-service teacher training ?	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
	01=NO TEACHER TRAINING (UT); 02=CERTIFICATE; 03=DIPLOMA; 04=DEGREE; 05=PGDE 96=OTHER (specify) _____	
	[IF 01, SKIP TO 2.6]	
2.5	How many years of pre-service teacher training have you received altogether?	
	A CERTIFICATE	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
	B DIPLOMA	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
	C DEGREE	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
	D PGDE	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
	E OTHER (specify) _____	
2.6	How adequately do you feel prepared for teaching the mathematics curriculum?	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
	01=VERY INADEQUATE; 02=INADEQUATE; 03=SOMEHOW ADEQUATE; 04=ADEQUATE; 05=VERY ADEQUATE	
2.7	In 2011, how many in-service teacher training short courses have you attended that were specific to mathematics? [FI: WRITE e.g. 04 FOR 4, 00 FOR 0 etc.]	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
	[IF 00, SKIP TO 2.10]	
2.8	Mention the names of the in-service teacher training short courses you attended	
	1 _____	
	2 _____	
	3 _____	
	4 _____	
2.9	How many days altogether have you attended this in-service ?	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
2.10	How many complete years (including this year 2012) have you been a primary school teacher?	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
2.11	How many complete years (including this year 2012) have you been a school teacher at this school?	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
2.12	How many complete years (including this year 2012) have you been a mathematics teacher?	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
2.13	How many complete years (including this year 2012) have you been a mathematics teacher in class 3/ 6?	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
2.14	How many streams of class three/six do you teach Mathematics?	<input style="width: 20px; height: 20px;" type="text"/>
	1=ONE; 2=TWO; 3=THREE; 4=MORE THAN THREE	
2.15	Which are those streams? [FI: THESE DIFFER BY SCHOOL, e.g. 6A, 6B, 6B or 6K1, 6K2, 6K3 etc?]	
	A _____	
	B _____	
	C _____	
2.16	In total, how many Mathematics lessons do you teach in class three/six in a week?	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
2.17	How often does the school Principal/Head teacher watch you teach mathematics?	<input style="width: 20px; height: 20px;" type="text"/>
	1=OFTEN; 2=SOMETIMES; 3=RARELY; 4=NEVER	
2.18	How often does the deputy principle/HOD/Senior teacher/master teacher in the school observe you teach mathematics?	<input style="width: 20px; height: 20px;" type="text"/>
	1=OFTEN; 2=SOMETIMES; 3=RARELY; 4=NEVER	
2.19	How many times did a mathematics curriculum or subject advisor from the zonal/division/district or province visit you in your classroom, at this or any other school in the last 18 months?	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
	01=NEVER; 02=ONCE; 03=TWICE; 04=MORE THAN TWICE; 05=NOT TEACHING IN THE LAST 18 MONTHS	
	[IF 01, SKIP TO 2.22]	
2.20	Which of the following activities did the mathematics curriculum or subject advisor undertake if s/he visited?	
	1=YES; 2=NO	
	A LOOKED AT LEARNERS WORK IN CLASS	<input style="width: 20px; height: 20px;" type="text"/>
	B CHECKED MY FILES AND RECORDS	<input style="width: 20px; height: 20px;" type="text"/>
	C DISCUSSED MY TEACHING AND AREAS OF IMPROVEMENT	<input style="width: 20px; height: 20px;" type="text"/>
	D SUGGESTED ATTENDING A TRAINING SESSION	<input style="width: 20px; height: 20px;" type="text"/>
	E EXPLAINED CURRICULUM CONTENTS	<input style="width: 20px; height: 20px;" type="text"/>
	F RECOMMENDED NEW TEACHING MATERIALS OR METHODS	<input style="width: 20px; height: 20px;" type="text"/>
	G GAVE ME NEW MATERIALS AND TEXTBOOKS	<input style="width: 20px; height: 20px;" type="text"/>
	H OTHER(SPECIFY) _____	<input style="width: 20px; height: 20px;" type="text"/>

2.22 In total, how many lessons do you teach in all subjects and classes in this school in a week?	[]	[]	
2.23 How often do you deal with learner discipline problems?	[]	[]	
01=SEVERAL TIMES A DAY; 02=ONCE A DAY; 03=SEVERAL TIMES A WEEK; 04=ONCE A WEEK; 05=LESS THAN ONCE A MONTH; 06=NEVER; 96=OTHER (Specify) _____			
2.23a Is learner absenteeism a significant problem in your class?	[]		
1=YES, FOR A FEW OF THE LEARNERS; 2=YES, FOR ABOUT HALF THE LEARNERS; 3=YES, FOR MOST OF THE LEARNERS; 4=IT IS NOT A PROBLEM			
2.23b On average, what proportion of your learners were absent at least in one day in the last school week?	[]	[]	
2.23c What do you think is the MAIN reason why learners are absent? [USE CODE SHEET C6]	[]	[]	
2.23d How many school days were you absent during the last five school going days when schools were open? [01=0days; 02=1day; 03=2days; 04=3days; 05=4days; 06=5days] [FI: WRITE THE NUMBER OF DAYS IN THE BOXES PROVIDED]	[]	[]	
2.27 What activity takes you out of school most often ?	[]	[]	
01=UNION MEETINGS; 02=DEPARTMENTAL OR COMMITTEE MEETINGS; 03=CONSULTATIONS WITH OTHER TEACHERS; 04=DOMESTIC RESPONSIBILITIES 05=RESPONSIBILITIES RELATED TO SECOND JOB; 06=RESPONSIBILITIES RELATED TO MY COMMUNITY SUCH AS LOCAL POLITICS 07=CONSULTATIONS WITH LEARNERS 08=CONSULTATIONS WITH PARENTS OR GUARDIANS OF LEARNERS 09=TRAINING OR PROFESSIONAL DEVELOPMENT 96=OTHER (specify) _____ 99=I AM NEVER TAKEN OUT OF MY CLASSES			
2.28 What is your typical means of transport from your residence to this school?	[]	[]	
01=WALKING; 02=BICYCLE; 03=MOTOR-CYCLE; 04=PUBLIC TRANSPORT; 05=DRIVING PRIVATE/SCHOOL VEHICLE			
2.29 Using this means (in 2.28), how long does it take you to get to school? [ENTER RESPONSE IN MINUTES e.g. 2hrs=120 minutes]	[]	[]	[]
2.30 How many of the families of the learners you teach do you know? 01=ALL THE FAMILIES; 02=THREE QUARTERS OF THE FAMILIES; 03=ABOUT HALF OF THE FAMILIES 04=ABOUT A QUARTER OF THE FAMILIES; 05=NONE OF THE FAMILIES 96=OTHER (SPECIFY) _____	[]	[]	
2.31 Do you face the following problems in your class(es) ? 1=YES; 2=NO			
[FI: READ OUT THE OPTIONS ONE AT A TIME AND CODE APPROPRIATELY] [ASK THE RESPONDENT TO RANK THE THREE MOST FREQUENT]			
A DISCIPLINE	[]		Rank []
B LACK OF RESOURCES/FINANCES/POVERTY/HUNGER	[]		[]
C LACK OF PARENTAL/ FAMILY INVOLVEMENT	[]		[]
D BULLYING/FIGHTING AMONG PUPILS	[]		[]
E SAFETY/SECURITY	[]		[]
F TEACHER ABSENTEEISM	[]		[]
G LEARNER ABSENTEEISM	[]		[]
H CLASS SIZE IS TOO BIG	[]		[]
I LACK OF TEACHERS	[]		[]
J LEARNERS NOT DOING THEIR WORK	[]		[]
K TEACHERS NOT DOING THEIR WORK/LACK OF GOOD UNDERSTANDING	[]		[]
L LANGUAGE PROBLEMS	[]		[]
M LACK OF KNOWLEDGE/ NO INTEREST	[]		[]
N NO INTEREST (ON PUPIL'S PART)	[]		[]
O NEW POLICIES/WORK LOAD/CANNOT COVER THE SYLLABUS	[]		[]
2.32 Is there an education resource center which serves your school? 1=YES; 2=NO IF 2, SKIP TO 3.0]			
2.33 Did you visit the education resource center in 2011? 1=YES; 2=NO IF 2, SKIP TO 3.0]			

2.34	What reasons made you visit the education resource center?	1=YES; 2=NO	
	A BORROW TEACHING/LEARNING MATERIALS		<input type="checkbox"/>
	B MAKE TEACHING/LEARNING MATERIALS		<input type="checkbox"/>
	C ATTEND TRAINING COURSES		<input type="checkbox"/>
	D EXCHANGE IDEAS WITH TEACHERS FROM OTHER SCHOOLS		<input type="checkbox"/>
	E SEEK ADVICE FROM THE STAFF OF THE RESOURCE CENTER		<input type="checkbox"/>
	F OTHER(SPECIFY) _____		<input type="checkbox"/>

3.0 SOME QUESTIONS ABOUT YOUR PLACE OF ABODE/HOME			
3.1	Which of the following things do you have access to in the place (home) where you stay during the school week?	1=YES; 2=NO	
	[FI: READ OUT THE OPTIONS TO THE RESPONDENT. INCLUDE ITEMS CURRENTLY BROKEN BUT CAN BE REPAIRED]		
	A DAILY NEWSPAPER		<input type="checkbox"/>
	B WEEKLY OR MONTHLY MAGAZINE		<input type="checkbox"/>
	C RADIO		<input type="checkbox"/>
	D TV SET		<input type="checkbox"/>
	E VIDEO CASSETTE RECORDER (VCR)/DVD		<input type="checkbox"/>
	F CASSETTE PLAYER		<input type="checkbox"/>
	G TELEPHONE/MOBILE PHONE		<input type="checkbox"/>
	H REFRIGERATOR/FREEZER		<input type="checkbox"/>
	I CAR		<input type="checkbox"/>
	J MOTORCYCLE		<input type="checkbox"/>
	K BICYCLE		<input type="checkbox"/>
	L PIPED WATER		<input type="checkbox"/>
	M ELECTRICITY, GENERATOR, SOLAR		<input type="checkbox"/>
	N TABLE TO WRITE ON		<input type="checkbox"/>
	O TOILET IN THE HOUSE		<input type="checkbox"/>
3.2	Approximately how many of the following livestock are owned by the household or place where you stay during the school week [FI: PLEASE WRITE THE NUMBER IN THE BOXES FOR EACH ITEM e.g. 0012 FOR 12]		
	A Cattle		<input style="width: 20px; border: 1px solid black;" type="text"/>
	B Sheep		<input style="width: 20px; border: 1px solid black;" type="text"/>
	C Goats		<input style="width: 20px; border: 1px solid black;" type="text"/>
	D Horses		<input style="width: 20px; border: 1px solid black;" type="text"/>
	E Donkeys		<input style="width: 20px; border: 1px solid black;" type="text"/>
	F Pigs		<input style="width: 20px; border: 1px solid black;" type="text"/>
	G Poultry		<input style="width: 20px; border: 1px solid black;" type="text"/>
	H Camels		<input style="width: 20px; border: 1px solid black;" type="text"/>
3.3	What is the main source of lighting by which you can read in the place (home) where you stay during the school week?	01=FIRE; 02=CANDLE; 03=PARAFFIN OR OIL LAMP; 04=GAS LAMP; 05=ELECTRIC LIGHTING, SOLAR, GENERATOR; 06=THERE IS NO LIGHTING	<input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>

4.0 QUESTIONS ABOUT MATHEMATICS IN YOUR STANDARD THREE/SIX CLASS AND YOUR TEACHING			
4.1	Does the school report for each pupil include a specific section for comment on Mathematics? 1=YES; 2=NO		<input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>
4.2	How important do you consider the following pupil activities in the teaching of Mathematics? 1=NOT IMPORTANT; 2=OF SOME IMPORTANCE; 3=IMPORTANT; 4=VERY IMPORTANT [FI: PROBE AND APPROPRIATELY INDICATE ALL THAT APPLY]		
	A WORKING IN PAIRS OR GROUPS TO SOLVE MATHEMATICS PROBLEM		<input type="checkbox"/>
	B WORKING ALONE ON PROBLEMS		<input type="checkbox"/>
	C PREPARING PROJECTS OR POSTERS TO BE SHOWN TO CLASS		<input type="checkbox"/>
	D USING PRACTICAL EQUIPMENT E.G. SCALES, RULERS, CALCULATORS, TAPE MEASURES etc		<input type="checkbox"/>
	E HOME ASSIGNMENTS		<input type="checkbox"/>
	F STUDYING AND INTERPRETING GRAPHS FROM MAGAZINES, NEWSPAPERS etc		<input type="checkbox"/>
	G RECITING TABLES, FORMULAE, etc		<input type="checkbox"/>
	H QUIZZES, TESTS, EXAMINATIONS, etc		<input type="checkbox"/>



4.4	Do you ask parents or guardians to sign pupils books to indicate that they have completed their Mathematics home assignments?	1=YES; 2=NO	<input style="width: 30px; height: 20px;" type="text"/>
4.4.1	How often do you usually meet with the parents or guardians of the pupils in your class to discuss pupil performance or related matters?	1=NEVER; 2=ONCE A YEAR; 3=ONCE A TERM; 4=ONCE OR MORE A MONTH	<input style="width: 30px; height: 20px;" type="text"/>
4.5	How important do you consider the following pupil activities in the teaching of Mathematics? [FI: READ OUT, PROBE AND CODE APPROPRIATELY] 1=NOT IMPORTANT; 2=OF SOME IMPORTANCE; 3=IMPORTANT; 4=VERY IMPORTANT		
	A BASIC NUMERACY		<input style="width: 30px; height: 20px;" type="text"/>
	B PROBLEM SOLVING (TRANSFER OF SKILLS TO EVERY DAY LIFE & APPLYING KNOWLEDGE)		<input style="width: 30px; height: 20px;" type="text"/>
	C THINKING SKILLS INCLUDING DIFFERENT WAYS OF THINKING IN SOLVING MATHS PROBLEM		<input style="width: 30px; height: 20px;" type="text"/>
	D CONFIDENCE IN SOLVING MATHEMATICS PROBLEMS		<input style="width: 30px; height: 20px;" type="text"/>
	E SATISFACTION FROM DOING MATHEMATICS		<input style="width: 30px; height: 20px;" type="text"/>
	F OPENING UP CAREER OPPORTUNITIES		<input style="width: 30px; height: 20px;" type="text"/>
	G DEVELOPMENT OF LIFE SKILLS		<input style="width: 30px; height: 20px;" type="text"/>
4.7	How often do you use the following approaches when teaching Mathematics? 1=OFTEN; 2=SOMETIMES; 3=RARELY; 4=NEVER [FI: READ OUT, PROBE AND CODE APPROPRIATELY]		
	A USING EVERYDAY PROBLEMS (VERBALLY, WRITTEN OR WORKSHEETS)		<input style="width: 30px; height: 20px;" type="text"/>
	B TEACHING THE WHOLE CLASS AS A GROUP		<input style="width: 30px; height: 20px;" type="text"/>
	C TEACHING IN A SMALL GROUP		<input style="width: 30px; height: 20px;" type="text"/>
	D TEACHING INDIVIDUALLY		<input style="width: 30px; height: 20px;" type="text"/>
	E TEACHING THROUGH QUESTION AND ANSWER TECHNIQUES		<input style="width: 30px; height: 20px;" type="text"/>
	F GIVING POSITIVE FEEDBACK		<input style="width: 30px; height: 20px;" type="text"/>
	G RELATING TO EVERYDAY LIFE SITUATIONS AS MUCH AS POSSIBLE		<input style="width: 30px; height: 20px;" type="text"/>
	H BASIC TRAINING SKILLS		<input style="width: 30px; height: 20px;" type="text"/>
	I EXPLAINING MATHEMATICAL PROCESSES		<input style="width: 30px; height: 20px;" type="text"/>
	J USING AVAILABLE LOCAL MATERIALS (E.G., FOR MEASURING AREA OR VOLUME)		<input style="width: 30px; height: 20px;" type="text"/>
4.8	How often do you give your pupils a written test in Mathematics?		<input style="width: 30px; height: 20px;" type="text"/>
	01=I DO NOT TEST THE PUPILS; 02=ONCE PER YEAR; 03=ONCE PER TERM; 04=TWO OR THREE TIMES PER TERM; 05=ONCE A MONTH; 06=TWO OR MORE TIMES PER MONTH		
5.0 QUESTIONS ABOUT YOUR STANDARD SIX CLASS AND YOUR TEACHING			
5.1	How many books do you have in your classroom library or book corner? (FI: PROBE BUT DO NOT INCLUDE MAGAZINES OR NEWSPAPERS. IF THERE IS NO CLASSROOM LIBRARY OR BOOK CORNER WRITE '000' IN THE BOXES PROVIDED)		<input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/>
5.2	How many of the following do you have in your classroom or teaching area? [FI: WRITE '00' IF NONE]		
	A SITTING PLACES FOR PUPILS (ON CHAIRS OR ON BENCHES)		<input style="width: 30px; height: 20px;" type="text"/>
	B WRITING PLACES FOR PUPILS (ON DESKS OR TABLES)		<input style="width: 30px; height: 20px;" type="text"/>

5.3	Which of the following are available in your classroom or teaching area? [FI: PROBE AND CODE APPROPRIATELY]	1=YES, 2=NO
	A A USABLE WRITING BOARD (BLACK, WHITE, GREEN)	<input type="checkbox"/>
	B CHALK (OR OTHER MARKERS)	<input type="checkbox"/>
	C A WALL CHART OF ANY KIND	<input type="checkbox"/>
	D A CUPBOARD OR LOCKER	<input type="checkbox"/>
	E ONE OR MORE BOOKSHELVES	<input type="checkbox"/>
	F A CLASSROOM LIBRARY, BOOK CORNER OR BOOK BOX	<input type="checkbox"/>
	G A TEACHER'S TABLE	<input type="checkbox"/>
	H A TEACHER'S CHAIR	<input type="checkbox"/>
5.4	Do you have access to the following items/materials in your school? [FI: READ OUT THE OPTIONS, PROBE AND CODE APPROPRIATELY]	1=YES, 2=NO
	A A MAP	<input type="checkbox"/>
	B AN ENGLISH DICTIONARY	<input type="checkbox"/>
	C GEOMETRICAL INSTRUMENTS (e.g. COMPASS, PRO-TRACTOR) FOR USE ON WRITING BOARD	<input type="checkbox"/>
	D TEACHER'S GUIDE (MATHEMATICS)	<input type="checkbox"/>
5.5	How many hours , on average, do you spend in a typical school week working on lesson preparation ?	<input style="width: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; border: 1px solid black;" type="text"/>
6.0 COMMENTS, INTERVIEW RATING AND WIND UP		
6.1	RECORD COMMENTS ABOUT THE INTERVIEW _____	
6.2	RATE THE INTERVIEW	1=VERY BAD; 2=BAD; 3=AVERAGE; 4=GOOD; 5=VERY GOOD <input type="checkbox"/>
6.3	RESULT OF INTERVIEW <input type="checkbox"/> <input type="checkbox"/> 01=COMPLETED; 02=RESPONDENT CANNOT ANSWER (e.g. IS CHALLENGED) 03=RESPONDENT IS OUT OF SCHOOL FOR EXTENDED PERIOD; 05=RESPONDENT'S WHEREABOUTS ARE UNKNOWN; 96 OTHER (specify); _____ 97=RESPONDENT REFUSED TO BE INTERVIEWED	
6.4	RECORD END TIME	<input style="width: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; border: 1px solid black;" type="text"/>
6.5	FIELD SUPERVISOR/TEAM LEADER'S CODE	<input style="width: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; border: 1px solid black;" type="text"/>
6.6	DATA ENTRY CLERK'S CODE	<input style="width: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; border: 1px solid black;" type="text"/>