

## Questions for adults

These questions are about your child's reading and maths. There are no right or wrong answers, so please answer the questions as accurately as you can.

1. How old is your child? \_\_\_\_\_ years

2. How often do you read with your child?

every day	almost every day	once or twice a week	once or twice a month	less often than once a month	not at all
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. How confident do you feel about reading with your child?

very confident	quite confident	not very confident	not at all confident
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. How does your child feel about reading?

they love it	they like it	they think it's okay	they don't like it	they don't like it at all
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. How often do you do maths activities with your child – e.g. money, numbers, shapes, measuring?

every day	almost every day	once or twice a week	once or twice a month	less often than once a month	not at all
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. How confident do you feel about doing maths with your child?

very confident	quite confident	not very confident	not at all confident
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. How does your child feel about maths?

they love it	they like it	they think it's okay	they don't like it	they don't like it at all
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Thank you!**