



## ***Students with Interrupted/Inconsistent Formal Education (SIFE)***

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### ***Oral Interview Questionnaire***

Student's Name	
Student's Date of Birth	
Interviewer's Name	
Interviewer's Title	
Location of Interview	
Student's School	
Date	

## How to Read and Record Interview Questions

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### ***Interviewer instructions:***

These are in brackets and italics, as in Item 7: [*If different*]

### ***Questions to ask student:***

These are numbered and should be read aloud to the student.

### ***Recording student answers:***

Sometimes a student's answer must be recorded on a given line or space provided, as in 2) - 6) on this page. Please PRINT CLEARLY and DO NOT abbreviate. Sometimes the interviewer must circle an answer that is provided, as in 1) FEMALE or MALE. These answers SHOULD NOT be read aloud to the student. See the following section for more information about recording responses.

## *Personal and Language Information*

1. Gender:  Male  Female
2. a. What is your first name?  
b. What is your last name?
3. a. How old are you?  
b. What is your date of birth?      35T
4. In what country were you born?
5. [*If different*] In what country were you raised?
6. In what city, town, or village were you raised?
7. What was the first language that you learned in your home as a child?
8. a. What other languages, if any, have you learned?  
b. Which language are you most comfortable using?
9. What language(s) did you learn at school?

*Warm-up Questions*

1. What do you do when you are not in school?

2. What do you like about living in a new country/or about where you live now?

## Benchmark 1: Family and Home Background

### Recording student answers:

Ask each question without giving prompts for the answers. Then check the answer(s) given by the student, filling in "OTHER" if the participant's answer does not appear under a given question. If the student doesn't respond to a given question, you may use the prompts to help the student provide an answer.

I'd like to ask you some questions about your family and your home.

1. Who do you live with? [check all that apply]

- Mother     
  Father     
  Sibling(s)     
  Aunt(s)     
  Uncle(s)  
 Cousin(s)     
  Grandparent(s)     
  Other \_\_\_\_\_
- 

2. a. Do any of the people you live with  
now speak English? [check one]

- Yes     
  No     
  I don't know

b. Do they speak your language?  
[check one]

- Yes     
  No     
  I don't know
- 

3. a. Of all the people that you live with now, who has the highest level of education?

b. What is his or her highest level  
of education? [check one]

- Primary School     
  Secondary School     
  College or University  
 Graduate School     
  I Don't Know
- 

4. In what languages do you speak to your parents/guardians?

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5. a. Did you work in your home country?  
[check one]

- Yes     
  No

b. What type of work did you do?

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6. a. Do you work now? [check one]

- Yes     
  No

b. [if yes] What type of work do you do?

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7. Do you have anyone at home who  
can help with homework? [check one]

- Yes     
  No
-

## Benchmark 2: Education History

### Recording student answers:

Start with "When you were..." and give the first age range below. Then, continue asking all the questions in that row. Then, start again with "When you were..." and give the following age range, and ask all the questions in the row again. Clearly write the student's response in the box provided without using abbreviations. Continue in this way until you reach the current age of the student.

Now I'd like to ask you some questions about your experiences going to school up until this year.

I'll be repeating some of the questions for each year that you've been in school.

Grade level	When you were . . .	In what country were you living?	Did you go to school for most of that school year?	How much time did you spend in school?	Was your school in a city or town?	In what language(s) were the lessons given?	Did you study outside of school that year?
	17-18						
	16-17						
	15-16						
	14-15						
	13-14						
	12-13						
	11-12						
	10-11						
	9-10						
	8-9						
	7-8						
	6-7						
	5-6						

At what age did you begin kindergarten in your country? \_\_\_\_\_

[If kindergarten not attended] At what age did you begin first grade? \_\_\_\_\_

Additional Information:

Now I am going to ask you questions about your school in your home country.

1. Tell me about your experiences at school. What was a typical school day in your country?

2. What do you feel that you do very well in school?

3. What was your favorite school subject?

### Benchmark 3: Language and Literacy Practices

#### Recording student answers:

Ask each question without giving prompts for the answers. Then circle the answer(s) given by the student, filling in "OTHER" if the participant's answer does not appear under a given question. If the student doesn't respond to a given question, you may use the prompts to help the student provide an answer.

Next I am going to ask you some questions about the language(s) you use now.

1. a. Do you like to read in your spare time?  Yes  No  
[check one]
- b. [If yes] What do you read? [check all that apply]  Magazines  Books  Comics  
 Newspapers  Other
- c. [If yes] What do you like to read about? [check all that apply]  Sports  Fashion  Music  
 Entertainment  News  Science Fiction  
 Mystery  Other
- d. [If yes] In which language(s) do you read? [check all that apply]  Primary Language  English  Other
- 
2. a. Do you like to write in your spare time?  Yes  No  
[check one]
- b. [If yes] What do you like to write? [check all that apply]  Poetry  Emails  Letters  
 Music Lyrics  Stories  Notes to family  
 Reports  Journal  Notes to friends
- c. [If yes] In which language(s) do you write? [check all that apply]  Primary Language  English  Other

Now I am going to ask you about some other activities outside of school.

3. When you talk to your friends in person or on the phone, which language(s) do you use? *[check all that apply]*
- Primary Language       English       Other
- 

4. a. Do you use: *(check all that apply)*
- The Internet       Computers       Video-games
- Telephone       Other       None of these
- b. *[If yes]* In which language(s)? *(check all that apply)*
- Primary Language       English       Other
- 

5. a. Do you watch TV? *[check one]*
- Yes       No
- b. *[If yes]* In which language(s)? *[check all that apply]*
- Primary Language       English       Other
- 

6. Do you use a cell or smart phone? *[check one]*
- Yes       No
- 

7. a. Do you use your smart/cell phone to search the internet?
- Yes       No
- b. *[If yes]* In which language(s)? *(check all that apply)*
- Primary Language       English       Other
-



### *Benchmark 4: Other Questions*

What career do you want to have in the future? What are your plans when you finish school?

### *Benchmark 5: Performance Questions*

(See instructions in the SIFE Oral Questionnaire Guidance)

1. Have the student look at a world globe or a map and find their home country and the capital.

Comments:

2. Have the student read an analog clock

Comments:



Office of Bilingual Education and World Languages (OBE-WL)  
<http://www.p12.nysed.gov/biling/>