**SAMPLE SURVEY QUESTIONS FOR TRANSPORTATION SURVEYS**

<table>
<thead>
<tr>
<th>Question Text</th>
<th>Category</th>
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</table>
| Do any of the following make it difficult to get to our fixed route bus stop? *(Check all that apply)*  
  a. Lack of curb cuts (small ramp to get from the road to the sidewalk)  
  b. Distance from your home to the nearest stop is too far  
  c. Sidewalks are not available  
  d. Service is not available frequently enough  
  e. Other ________________________________ | barriers |

| Have you had difficulty finding a ride to a medical appointment in the past 6 months? If yes, please select all reasons that apply:  
  a. I need a wheelchair accessible vehicle.  
  b. I don't have enough money for the fare.  
  c. I don't know who to call to request a ride.  
  d. My friends and family are not available to take me.  
  e. There are no rides available when I call.  
  f. I can't get a ride at the time I need to go.  
  g. I have to wait too long for a ride back home after my appointment.  
  h. Other (Please explain): ___________________________ | barriers |

| How often are you unable to get to where you need to go because of not having a way to get there?  
  __ Rarely or Infrequently  
  __ Several times a year  
  __ About once a month  
  __ More than once a month  
  __ Once a week or more often | barriers |

*Survey questions were submitted by attendees of the NADTC course module, Writing Effective Survey Questions; Spring, 2022*
<table>
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<tr>
<th>Question</th>
<th>Options</th>
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| **What prevents you from using public transportation (such as city bus, train, _______) in your area? (Choose all that apply)** | A. language barrier  
B. not within walking distance  
C. too confusing to use  
D. none available to me or in my area  
E. Other______________________  
F. I use public transportation |
| **If you do not use the bus, what are the reasons? Mark all that apply and use the box below if you would like to tell us more about your reasons.** | ___too expensive  
___I don't live close enough to a bus stop  
___It doesn't serve my neighborhood  
___It doesn't go where I need to go  
___No benches/shelters at the bus stop  
___I would be too embarrassed  
___Often it is not on time  
___the trips are too long  
___bad customer service  
___I don't like sharing rides with others  
___I don't know how  
Other (please explain in the box below) |
| **Do you have difficulty leaving your home due to a lack of transportation?** | ___Yes  
___No |
| **What is the hardest thing for you when using public transportation? (check all that apply)** | ___going up and down steps  
___doors that do not open automatically  
___no assistance for people who have vision or hearing impairment  
___other______________________ |
<p>| <strong>What would encourage you to use public transportation more often? (open-ended)</strong> | |
| <strong>What are some things you are concerned about when using public transportation? (open-ended)</strong> | |</p>
<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>What do you think would get more people to use public transportation? <em>(open-ended)</em></td>
<td>barriers</td>
</tr>
<tr>
<td>What obstacles do you think people are concerned with in reference to public transportation? <em>(open-ended)</em></td>
<td>barriers</td>
</tr>
<tr>
<td>How do you rate your overall level of satisfaction with the coalition over the past 12 months?</td>
<td>coalition</td>
</tr>
<tr>
<td>What is one thing you would like to see the Coalition address in the next 1-3 years? <em>(open-ended)</em></td>
<td>coalition</td>
</tr>
<tr>
<td>How do you contact the transportation service you use? <em>(check all that apply)</em></td>
<td>communication</td>
</tr>
<tr>
<td>If public transportation were available in your area, how much would you be willing and able to pay per ride (one-way trip)?</td>
<td>cost</td>
</tr>
<tr>
<td>Please rate your level of satisfaction with each method of transportation you have you used in the last six months? <em>(Matrix)</em></td>
<td>customer satisfaction</td>
</tr>
</tbody>
</table>

*Response options of methods*: Walking, Biking, Public Bus, Public Subway, Paratransit Service, Taxi, Ridesharing (Uber/Lyft), Car Rental, Friend/Family Member, Driving myself in my own car

*Response options of satisfaction*: Very Dissatisfied, Dissatisfied, Ok, Satisfied, Very Satisfied, I don't use this option.
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<tr>
<th>Question</th>
<th>Options</th>
<th>Customer Satisfaction</th>
</tr>
</thead>
<tbody>
<tr>
<td>How would you currently rate our transit system as it is today?</td>
<td>a. Excellent</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b. Good</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c. Fair</td>
<td></td>
</tr>
<tr>
<td></td>
<td>d. Poor</td>
<td></td>
</tr>
<tr>
<td></td>
<td>e. Do not know enough about the current system as it is currently</td>
<td></td>
</tr>
<tr>
<td>The buses are now equipped with kneeling positions that allow the bus to lower itself to curb level to help make it easier to get on the bus. Have you found this to be beneficial for yourself or someone you care for?</td>
<td>___Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>___I have not used this</td>
<td></td>
</tr>
<tr>
<td></td>
<td>___No</td>
<td></td>
</tr>
<tr>
<td>On a scale from 1 – 10, how satisfied or dissatisfied are you with the availability of the bus service?</td>
<td>1 (Not Satisfied) 10 (Very Satisfied)</td>
<td></td>
</tr>
<tr>
<td>How likely are you to use our transit company for your next doctor's appointment?</td>
<td>1 (Very Unlikely) 10 (Very Likely)</td>
<td></td>
</tr>
<tr>
<td>When riding with <em>our transportation system</em> how friendly or unfriendly was your driver?</td>
<td>___Very friendly</td>
<td></td>
</tr>
<tr>
<td></td>
<td>___A little friendly</td>
<td></td>
</tr>
<tr>
<td></td>
<td>___Neither friendly nor unfriendly</td>
<td></td>
</tr>
<tr>
<td></td>
<td>___Not very friendly</td>
<td></td>
</tr>
<tr>
<td></td>
<td>___Very unfriendly</td>
<td></td>
</tr>
<tr>
<td>When arranging public transportation, are there handicapped accessible vehicles available at the time you need them?</td>
<td>___Always</td>
<td></td>
</tr>
<tr>
<td></td>
<td>___More than half the time</td>
<td></td>
</tr>
<tr>
<td></td>
<td>___Less than half the time</td>
<td></td>
</tr>
<tr>
<td></td>
<td>___Never</td>
<td></td>
</tr>
<tr>
<td>How do you feel about the current transportation options in your area?</td>
<td>(open-ended)</td>
<td></td>
</tr>
<tr>
<td>What is your zip code?</td>
<td>(Select from dropdown menu to avoid typing errors)</td>
<td>demographic</td>
</tr>
</tbody>
</table>
**What are your most common destinations? (Choose all that apply)**

- A. doctor's appointments
- B. grocery shopping
- C. personal appointments
- D. Senior/Community Center
- E. Other ____________________

**What type of trips would you like to take that your transportation provider doesn’t offer? Check all that apply**

- a. Long distance (more than 50 miles)
- b. Multi-stop trips (multiple places within the same trip)
- c. After hours (before 7 a.m. and/or after 6 p.m.)
- d. One-time Medical/health care
- e. Reoccurring medical trips (dialysis, mental health, oncology)
- f. Essential non-medical (banks, lawyers, post office)
- g. Employment or Job Seeking
- h. Education or training
- i. Volunteer activities
- j. Childcare
- k. Quality of life (shopping, recreational activities, religious services)
- l. Social services
- m. Other (open text)

**How far do you travel to the grocery store (one-way trip)?**

- ___ 5 miles or less
- ___ Between 5 and 10 miles
- ___ More than 10 miles
<table>
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<tr>
<th>Question</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Where are you most often unable to go because of not having a way there?</td>
<td>Grocery Shopping, Other shopping, Pharmacy, Bank, Medical Appointments, Other Appointments, Church, School or classes, To see friends/family, Other (please list): __________________</td>
</tr>
<tr>
<td>Have you recently quit driving? If yes, have any of the following happened as a result of not driving?</td>
<td>missing work, missing medical appointments, unable to buy fresh foods, using a lot of my income on taxi fares or other forms or transportation, other (please explain in the box below)</td>
</tr>
<tr>
<td>Does not driving affect how you feel about your independence?</td>
<td>I still feel very independent, I feel I have lost some independence, but am still able to do most things, I have not noticed an impact on my independence, I feel dependent on others for a lot more things since I don’t drive, I feel a big loss of independence as a result of not driving</td>
</tr>
<tr>
<td>Rate the level of isolation you feel as a result of not driving:</td>
<td>Not isolated 1-------------5 Very isolated</td>
</tr>
<tr>
<td>How many times in the last 3 months have you had to cancel an appointment due to lack of transportation?</td>
<td>0 1 2 3 4 5 6 (or more)</td>
</tr>
</tbody>
</table>
When you are unable to find transportation, what activities do you give up? (Check all that apply.)

___Work
___Shopping
___Community Events
___Medical Appts
___Social/Family events
___Other__________________

How often do you ride this bus service? (please check one)
- 5 - 7 days per week
- 2 - 4 days per week
- Once a week
- A few days per month
- Once a month or less

Do you currently use public transportation? Yes or No.
If yes, please indicate the frequency of your public transit use EACH WEEK.
- 1-2 times per week
- 3-4 times per week
- 5-6 times per week
- 7 or more times per week
- I don’t use public transit

How often do you travel during the week?
- 1-2 times
- 3-4 times
- 5 or more times

Which best describes your fare type usage?
- Reduced | Full Fare *(select one)*
- Single Ride | Day Pass | Weekly Pass | 30-Day Pass *(select one)*

**effects of not driving**

**frequency of use**

**frequency of use**

**frequency of use**

**modes**
In the last few weeks, how have you traveled? (Check all that apply.)
___A volunteer service drove me
___Lyft/Uber
___Taxi
___Rode a bicycle
___Walked
___Drove Myself
___Agency/senior services bus, van, or car
___Friend or family drove me
___Other_____________________________

What type of transportation do you use?
___I use my own vehicle
___Public transportation (bus, train, paratransit)
___Taxi/uber/lyft
___Rides from family or friends
___Bicycle
___Walk
___Other____________________________
___I don’t have access to transportation

Are you able to get to the places you need to go?
___all of the time
___over half of the time
___about half of the time
___less than half of the time
___never

I am able to use and reload my transportation payment card without assistance.
___Strongly Agree
___Agree
___Neutral
___Disagree
___Strongly Disagree
<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
<th>Needs Being Met</th>
<th>Priorities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you use the bike racks on the bus?</td>
<td>___Yes, ___No, I don't know how to, ___No, I didn't know there were bike racks, ___No, I don't like using the racks, ___I don't need to transport my bike, ___I don't ride a bike, ___Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you need help getting from your front door to the vehicle?</td>
<td>____Yes, ____No, ____Sometimes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are you able to get to your areas of interest by the current transportation options? (open-ended)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>When using the Fixed Route Bus Service, please rank the following in order of importance to you with 1 being the most important:</td>
<td>___Availability of services, ___Frequency of services, ___Travel time, ___Condition of stops and shelters, ___Fare costs, ___Punctuality of bus</td>
<td></td>
<td></td>
</tr>
<tr>
<td>As a rider, what is most important to you as we plan for a better transportation system:</td>
<td>___Availability and frequency of scheduled services, ___Ease of scheduling on-demand services, ___Ease of contacting customer service support, ___Affordability of a rider's fare, ___Availability of internet services on the bus, ___Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Please rank the top five items listed below and their importance to you in choosing to use public transportation. (*One being the most important and five being least important.*)

<table>
<thead>
<tr>
<th>Convenience</th>
<th>Cost</th>
<th>Safety</th>
<th>Location of Bus Stop</th>
<th>Lights and Bench at Bus Stop</th>
<th>Length of Trip</th>
<th>Number of Transfers</th>
<th>Other</th>
</tr>
</thead>
</table>

Which of the following reasons would encourage you to use public transportation more frequently in the future? Please rank your answers in order of importance, with 1 being the most important.

- a. Reliable bus service
- b. Safety at bus stops
- c. Safety on buses
- d. Bus service close to home
- e. Access to schedule/route information
- f. Other

Please rate how safe or unsafe you feel riding the bus.

1 (Completely unsafe) ———— 10 (Completely safe)

If you don’t feel completely safe, which of the following matches your reason? (select all that apply)

- a. Bus is driven too fast
- b. Stops are made too abruptly
- c. Bus does not feel clean
- d. Turns are made too quickly
- e. Other riders make me feel unsafe
- f. There is not enough time to board/alight
- g. Other

<p>| priorities | safety | safety |</p>
<table>
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</thead>
</table>
| How safe or unsafe do you feel while waiting at the bus stop/terminal at night? (choose one) | ___ I feel very unsafe  
___ I feel somewhat unsafe  
___ I feel neither safe nor unsafe  
___ I feel somewhat safe  
___ I feel very safe  
___ I do not take buses from that terminal at night because I feel unsafe  
___ I do not take buses from that terminal at night, unrelated to safety |
| How would you prefer to schedule your curb to curb rides?  Choose one    | a. call in by phone  
b. text message  
c. email  
d. cell phone app  
e. other________________ |
| How would you prefer to get a confirmation for your scheduled ride?  Choose one | a. call by phone  
b. text message  
c. email  
d. cell phone app  
e. other________________ |
| Please rate your experience making a reservation with our transit company. | 1 (Very Difficult) ------- 5 (Very Easy)  |
| What hours do you need help with transportation? (Check all that apply)   | ____ Before 9:00am  
____ 9:00am - 5:00pm  
____ After 5:00pm |
| We are considering expanding our transportation service and would like to know when you would most likely use the service. Check all that apply. | ______ Monday through Friday, between 8:00am and 4:00pm  
_______ Monday through Friday, between 4:00pm and 9:00pm  
_______ Saturdays between 9:00am and 5:00pm |
*Your agency* currently provides transportation to dialysis centers on weekdays, Monday through Friday. If available, would you be interested in Saturday trips to dialysis?

YES   -  NO

<table>
<thead>
<tr>
<th>time of use</th>
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</table>

When are you most likely to use our transit routes. Check all that apply.

___ before 11 a.m.
___ between 11 a.m. and 5 p.m.
___ after 5 p.m.

<table>
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<th>time of use</th>
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How long is a reasonable amount of time to wait for a bus?

a. 5 minutes  
b. 10 minutes  
c. 15 minutes  
d. 30 minutes  
e. Other

<table>
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<th>wait time</th>
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How easy or difficult is it to access our current website to find out bus schedule information?

a. Extremely easy  
b. Somewhat easy  
c. Neither difficult or easy  
d. Somewhat difficult  
e. Extremely difficult

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