



"Transportation Survey for Parents/Guardians of Elementary School Students"

(If completing only one survey, please answer for your youngest child in elementary school. Choose the answers that best reflect your household's school transportation choices.)

1. **Gender and grade of your [youngest] child at this school:** **Gender:** (circle one) **M F**
Grade: (circle one) **K 1 2 3 4 5**

2. **How far does your child live from school?** (check one box)
 less than 1.5 miles 1.5 to 5 miles 5 to 10 miles
 more than 10 miles I'm not sure

3. **How does your child usually get to and from school?** (check one box)
To School: **After School:**
 Walk/Bike Walk/Bike
 School bus School bus
 Driven by family member only Driven by family member only
 Carpooling Carpooling
 Daycare van Daycare van
 City bus City bus

4. **How long does it usually take your child to travel to and from school?** (check one box)
To School: **After School:**
 Less than 5 minutes Less than 5 minutes
 5 - 15 minutes 5 - 15 minutes
 16 - 30 minutes 16 - 30 minutes
 More than 30 minutes More than 30 minutes
 I'm not sure I'm not sure

5. **How often does your child ride the school bus?** (check one box)
 Frequently (always, or most of the time) Rarely (a few times a month, or less)
 Occasionally (a few times a week) Never

6. **If your child rarely or never rides the school bus, why not?** (check all that apply)
 I have concerns about bus safety
 I have concerns about behavior on the bus
 Bus runs late too often
 Bus schedule does not fit our household schedule
 Bus ride takes too long
 My child goes to daycare or after-school activities
 My child does not like riding the bus
 Bus service is not provided in my child's neighborhood
 Never really thought about it
 Other (briefly explain) _____

7. **What would most likely convince you to have your child ride the bus more often?**

8. **Does your child ever walk or bike to school?** (check one box)
 No, never Only on annual "Walk to School Day" Yes, on a regular basis

9. Does your child ever carpool to school? (check one box) Yes No

10. If you carpool, with how many other families at the same school? _____

11. If you do not carpool, why not? (check all that apply)

- I have safety concerns about other drivers
- It is too inconvenient
- I don't know anyone who can carpool with us
- Never really thought about it
- Other (briefly explain) _____

12. Would you consider carpooling if you had more information? Yes No

Idling

(For these 4 questions, circle the **one answer** that you think is correct)

1. How long can you idle before you waste more gasoline than re-starting?

- A. less than 1 minute B. about 5 - 10 minutes C. at least 30 minutes

2. Exhaust from your own car can be harmful to children's health. True False

3. If you idle for just 10 minutes everyday, how much extra gasoline will you use up in a week?

- A. not much at all B. about half a gallon C. up to one gallon

4. Idling in cold weather is good for your engine. True False

Demographics

(You may choose the "prefer not to answer" option for these questions)

1. What is the highest level of school you have completed? (check one box)

- Elementary or middle High school graduate or GED College, 4 or more years
 Some high school 2-year college or technical school Prefer not to answer

2. Does your child receive free or reduced-price school meals? (check one box)

- free meals reduced-price meals neither Prefer not to answer

3. How many licensed drivers live in your household? (check one box)

- 0 1 2 3 or more Prefer not to answer

4. How many vehicles does your household own or lease? (check one box)

- 0 1 2 3 or more Prefer not to answer

Any comments or questions about school transportation?

Thanks for your help!