

# TRAFFIX TRANSPORTATION SURVEY

Command: \_\_\_\_\_ Bldg: \_\_\_\_\_ ETC/TIP Representative: \_\_\_\_\_

Please complete this short survey about your current commute. Your responses will help us find ways to improve your commute to work. **The information on this survey will be kept completely confidential.**

1. Name (**Please print**): \_\_\_\_\_
2. Full Address: \_\_\_\_\_ City: \_\_\_\_\_ ZIP: \_\_\_\_\_
3. Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_
4. Major intersection near your home: \_\_\_\_\_
5. Work Hours: \_\_\_\_\_ (A.M. / P.M.) To: \_\_\_\_\_ (A.M. /P.M.) Shift: \_\_\_\_\_
6. What days do you work:  Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  Sunday
7. A. How do you normally get to work? (Check main mode)  
 Carpool  Bicycle  Drive Alone  Dropped Off  Vanpool  Walk  Motorcycle  
 Combination of \_\_\_\_\_ and \_\_\_\_\_  Bus
8. If you usually drive alone to work, what is your main reason? \_\_\_\_\_
9. If you drive alone, what would encourage you to use alternative transportation? (Please rank top three--- 1,2,3)  
 Save money on commuting expenses (gas, insurance, etc.)  Employer helps pay for commute costs  
 Guaranteed ride home in case of an emergency  Company provided vanpool  
 Preferential/Reserved parking for carpools/vanpools  Availability of bus to and from work  
 A personalized list of carpool/vanpool matches  Availability of Park-and Ride lots
10. Which of the following means of commuting would you consider using 1-2 days per week? (Check up to two)  
 Carpool  Bus  Bicycle  Vanpool  Walk
11. A. Would you like to have your name and information entered into a ridesharing database, which will match you with people who live and work near your command? This information will only be used for matching purposes.  
 YES (**If yes, complete B through E**)  NO  
B. Select a ridesharing preference:  Drive Only  Ride Only  Drive and Ride  
C. Prefer to be matched with:  Smokers  Non-Smokers  Either  
D. Select gender preference:  Male  Female  Either  
E. If you prefer to be matched from an alternate location (for example, daycare), what location?  
Name of location: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Major intersection near location: \_\_\_\_\_
12. Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**THANK YOU FOR YOUR COOPERATION!**  
**QUESTIONS? CALL 1-800-700-RIDE**