



# Transit Choices Study

TransitCenter  
5-21-2018

This questionnaire format is designed to create a similar look to the online survey instrument once it is programmed.

A few things to keep in mind as you review the questionnaire:

1. Screens with a gray background (like this one) are for reviewers, and will not appear in the programmed survey.
2. Notes for reviewers can be found in the “Notes” section at the bottom of each slide.
3. Text in [ ] square brackets indicates branching logic or other notes for reviewers that will not be seen by respondents.
4. Text in { } curly brackets indicates a dynamic text insertion based on a respondent’s previous answers. E.g. “In the questions that follow, please continue to think about your {trip purpose} trip.”
5. While reviewing the questionnaire, assume that all respondents see each screen unless otherwise noted.
6. General text appearing in the “Notes” section of a slide indicates programming logic.
7. Text in [ ] square brackets appearing in the “Notes” section of a slide denotes the online survey page name and associated database variable for that question.
8. The survey will have a progress bar in the footer that will show the “percent” complete as respondents progress through the questionnaire.

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### In what language would you like to take the survey?

[Repeat question in Spanish. Language established during translation]

- ☐ English
- ☐ Español

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Thank you for participating in the TransitCenter Transit Choices Survey!

The purpose of this survey is to learn more about how you use **public transportation** [hover/click popup info below- to be applied on all slides where public transportation is indicated in orange].

Your answers will be kept confidential and will only be used for this study.

Please click “Next” to begin.

### What do we mean by “public transportation”?

We mean buses, trains, subways, and other forms of transportation that charge set fares, run on fixed routes, and are available to the public.

So, for this study...

Your local bus, light rail, or subway **is** public transportation

A school bus or employee shuttle **is not** public transportation

A non-commuter bus/train that travels between cities **is not** public transportation (Megabus, Amtrak, etc.)

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For the following questions, we are going to ask you about two time periods:

- Now
- Two years ago (Spring 2016)

Please do your best to recall your unique circumstances from two years ago as you answer these questions.

Please click “Next” to continue.

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How old are you?

- ☐ Under 18 years old
- ☐ 18-24 years old
- ☐ 25-34 years old
- ☐ 35-44 years old
- ☐ 45-54 years old
- ☐ 55-64 years old
- ☐ 65 years or older



**\*Note:**

This information is only used to understand if we have received a representative sample of the region's population. Your answers will never be linked back to you and will only be analyzed with all other survey responses combined.

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For the following time periods, about how often did you use **public transportation**?

Time Period	Never	Less than one day per month	1-3 days per month	1-2 days per week	3-4 days per week	5 days per week	6 days per week	7 days per week
Now	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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## Let's talk about...

☐ **Home** ☐ **Work** ☐ **Public Transportation** ☐ **Ride-Hailing** ☐ **Taxis** ☐ **Driving** ☐ **Carsharing** ☐ **Biking** ☐ **Walking**

What is your current home ZIP code? *(please enter 00000 if outside US)*

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Where did you live **two years ago (Spring 2016)**?

- ☐ The same home as now
- ☐ A different home

What was your home ZIP code **two years ago (Spring 2016)**? *(please enter 00000 if outside U.S.)*

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Think about your most recent move. Why did you **move**?  
Please select **up to three** primary reasons.

Reason	Selection
Wanted cheaper housing	<input type="checkbox"/>
To be closer to work or school/easier commute	<input type="checkbox"/>
To be closer to amenities (restaurants, shops, etc.)	<input type="checkbox"/>
Wanted more space/upgrade	<input type="checkbox"/>
Wanted less space/downsize	<input type="checkbox"/>
Wanted to own home, not rent	<input type="checkbox"/>
To establish own household (e.g., moving out of parents' home)	<input type="checkbox"/>
New job/school or job transfer	<input type="checkbox"/>
Wanted better neighborhoods (schools, crime, etc.)	<input type="checkbox"/>
Change in marital/relationship status	<input type="checkbox"/>
Other <input type="text" value="Please Specify..."/>	<input type="checkbox"/>

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How would you describe your **new neighborhood compared to your previous neighborhood?**

My new neighborhood is...

- ☐ Much more urban
- ☐ A little more urban
- ☐ Not much different
- ☐ A little more suburban or rural
- ☐ Much more suburban or rural

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Currently, how often do you make online shopping purchases which are then delivered to your home or work?

Time Period	Never	Less than one day per month	1-3 days per month	1-2 days per week	3-4 days per week	5 or more days per week
Now	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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For the following time periods, what best described your employment status?

Time Period	Employed full-time	Employed part-time	Student and working	Student and not working	Retired	Not currently employed
Now	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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What is the ZIP code at your current primary work location? *(please enter 00000 if outside US)*

☐ My daily work location changes (other sites, homes, offices, etc.)

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Where did you work **two years ago (Spring 2016)**?

- ☐ The same primary work location as now
- ☐ A different primary work location

What was the ZIP code of your primary work location **two years ago (Spring 2016)**? *(please enter 00000 if outside U.S.)*

☐ My daily work location changed (other sites, homes, offices, etc.)

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Think about your most recent change in work locations. Why did you **change work locations**?

Please select **up to three** primary reasons.

Reason	Selection
Wanted better work/life balance	<input type="checkbox"/>
To be closer to home/easier commute	<input type="checkbox"/>
To be closer to amenities (restaurants, shops, etc.)	<input type="checkbox"/>
Injury/disability	<input type="checkbox"/>
Issues at previous job (pay, advancement potential, management, culture, etc.)	<input type="checkbox"/>
Lost my job	<input type="checkbox"/>
Moved away (not for a job)	<input type="checkbox"/>
Career change/Better job	<input type="checkbox"/>
Other <input type="text" value="Please Specify..."/>	<input type="checkbox"/>

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For the following time periods, how often did you telecommute for work or otherwise work from home?

Time Period	Never	Less than one day per month	1-3 days per month	1-2 days per week	3-4 days per week	5 or more days per week
Now	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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For the following time periods, which types of **public transportation** did you use at least once a month?  
Please select all that apply.

Time Period	Bus (local buses, express buses, etc.)	Rail (subway, commuter rail, trolleys, light rail, etc.)	Disability Service (paratransit van, minibus, etc.)	Other (ferries, etc.)
Now	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Two years ago (Spring 2016)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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For the following time periods, which method of payment did you most often use for **public transportation**?

Time Period	Unlimited pass (monthly, weekly, etc.)	Pay as you go	Other
Now	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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For the following time periods, was your **public transportation** cost paid for by someone other than you or your family (like an employer, university, or residential building)?

Time Period	Yes— fully paid	Yes—partially paid	No
Now	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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For the following time periods, did you pay for your **public transportation** costs through a pre-tax commuter benefit program (TransitChek, Commuter Check, etc.)?

Time Period	Yes	No	Not sure
Now	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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For the following time periods, during what times of day did you typically make trips by **public transportation**?  
Please select all that apply.

Time Period	Weekdays (during the day)	Weeknights	Weekend days	Weekend nights
Now	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Two years ago (Spring 2016)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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For the following time periods, what types of trips did you typically use **public transportation** for?  
Please select all that apply.

Time Period	Work	School	Medical/ hospital	Social/ recreation/ entertainment	Personal business/ errands	Airport
Now	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Two years ago (Spring 2016)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Based upon your personal experience in the last two years **ONLY**, where are the most important areas for improvement in **bus service**?

Please select up to **three** areas for improvement.

Category	Area for improvement	Selection
Personal Safety/Comfort	Safety while on the bus	<input type="checkbox"/>
	Safety while waiting at or getting to the bus stop	<input type="checkbox"/>
Service	Frequency of bus service	<input type="checkbox"/>
	Reliability/predictability of trip time	<input type="checkbox"/>
	Crowding on the bus	<input type="checkbox"/>
	Delays/traffic while on the bus	<input type="checkbox"/>
	Quality/availability of info about departure times and delays	<input type="checkbox"/>
	Handling of major service disruptions (breakdowns, reroutes, etc.)	<input type="checkbox"/>
	Fare for bus trip	<input type="checkbox"/>
	Facilities around bus stop (shelters, sidewalks, lighting, etc.)	<input type="checkbox"/>
	Access to the places I need to go	<input type="checkbox"/>
	Other <input type="text" value="Please Specify..."/>	<input type="checkbox"/>



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Based upon your personal experience in the last two years **ONLY**, where are the most important areas for improvement in **rail service**?

Please select up to **three** areas for improvement.

Category	Area for improvement	Selection
Personal Safety/Comfort	Safety while on the train	<input type="checkbox"/>
	Safety while waiting at or getting to the train station	<input type="checkbox"/>
Service	Frequency of train service	<input type="checkbox"/>
	Reliability/predictability of trip time	<input type="checkbox"/>
	Crowding on the train	<input type="checkbox"/>
	Delays/traffic while on the train	<input type="checkbox"/>
	Quality/availability of info about departure times and delays	<input type="checkbox"/>
	Handling of major service disruptions (breakdowns, closures, etc.)	<input type="checkbox"/>
	Fare for train trip	<input type="checkbox"/>
	Facilities around train station (platforms, sidewalks, lighting, etc.)	<input type="checkbox"/>
	Other <input type="text" value="Please Specify..."/>	<input type="checkbox"/>

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For the following time periods, overall how satisfied were you with your experience on **bus** service?

Time Period	Very dissatisfied	Dissatisfied	Neither	Satisfied	Very satisfied
Now	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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For the following time periods, overall how satisfied were you with your experience on **rail service**?

Time Period	Very dissatisfied	Dissatisfied	Neither	Satisfied	Very satisfied
Now	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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For the following time periods, how often did you make trips as a passenger in a **ride-hailing vehicle (Uber, Lyft, Via, etc.)**?

Time Period	Never	Less than one day per month	1-3 days per month	1-2 days per week	3-4 days per week	5 or more days per week
Now	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Currently, during what times of day do you typically make trips as a passenger in a **ride-hailing vehicle (Uber, Lyft, Via, etc.)?**

Please select all that apply.

Time Period	Weekdays (during the day)	Weeknights	Weekend days	Weekend nights
Now	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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For the following time periods, what types of trips did you typically use ride-hailing vehicles (Uber, Lyft, Via, etc.) for?  
Please select all that apply.

Time Period	Work	School	Medical/ hospital	Social/ recreation/ entertainment	Personal business/ errands	Airport
Now	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Two years ago (Spring 2016)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Currently, what types of ride-hailing services (Uber, Lyft, Via, etc.) do you use at least once a month?  
Please select all that apply.

- ☐ Standard rides (e.g. uberX, Lyft)
- ☐ Pooled rides in a car (e.g. uberPOOL, Lyft Line)
- ☐ Pooled rides in a van or minibus (e.g. Via, Chariot)
- ☐ Large rides (e.g. uberXL, Lyft Plus)
- ☐ Luxury rides (e.g. UberBLACK, UberLUX, Lyft Premier, Lyft Lux)
- ☐ Wheelchair-accessible rides (e.g. UberWAV, Lyft Access Mode)
- ☐ Subscriptions/Passes for any of the above ride types (e.g. Uber Plus, Lyft Line Pass)

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For the following time periods, how often did you make trips by **taxi**?

Time Period	Never	Less than one day per month	1-3 days per month	1-2 days per week	3-4 days per week	5 or more days per week
Now	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Currently, during what times of day do you typically make trips by **taxi**?  
Please select all that apply.

Time Period	Weekdays (during the day)	Weeknights	Weekend days	Weekend nights
Now	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Do you have a valid driver's license?

- ☐ Yes
- ☐ No

When did you obtain your driver's license?

- ☐ Within the last two years
- ☐ More than two years ago (Spring 2016)

Did you ever have a valid driver's license?

- ☐ No
- ☐ Yes, within the last two years
- ☐ Yes, but more than two years ago (Spring 2016)

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For the following time periods, did you have regular access to a car (not including ride-hailing, carshare, taxis, etc.)?

Time Period	Yes— I had full access to a car	Yes— but other people used this car as well	Yes— I could get rides from other people when I needed to	No
Now	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Have you or your spouse/domestic partner purchased a car within the last two years?

- ☐ Yes
- ☐ No

Did this purchase replace another car which you traded in or got rid of?

- ☐ Yes- my purchase replaced another car which I traded in or got rid of
- ☐ No

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Did you receive a car loan for your most recent car purchase?

- ☐ Yes
- ☐ No

(If yes)

How **easy or difficult** was it to get a car loan?

- ☐ Much easier than expected
- ☐ Somewhat easier than expected
- ☐ About what I expected
- ☐ Somewhat more difficult than expected
- ☐ Much more difficult than expected

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For the following time periods, how often did you make trips **by car** (not including ride-hailing, carshare, taxis, etc.)?

Time Period	Never	Less than one day per month	1-3 days per month	1-2 days per week	3-4 days per week	5 or more days per week
Now	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Currently, during what times of day do you typically make trips **by car** (not including ride-hailing, carshare, taxis, etc.)?  
Please select all that apply.

Time Period	Weekdays (during the day)	Weeknights	Weekend days	Weekend nights
Now	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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For the following time periods, what types of trips did you typically make trips by car for (not including ride-hailing, carshare, taxis, etc.)?

Please select all that apply.

Time Period	Work	School	Medical/ hospital	Social/ recreation/ entertainment	Personal business/ errands	Airport
Now	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Two years ago (Spring 2016)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Why did you {car\_increase} in the last two years?  
Please select **up to three** primary reasons.

Reason	Selection
I needed to make more trips	<input type="checkbox"/>
Other family members needed to make more trips	<input type="checkbox"/>
Parking at home became easier or cheaper	<input type="checkbox"/>
Parking at work/school became easier or cheaper	<input type="checkbox"/>
Wanted a car to drive for ride-hailing vehicle (Uber, Lyft, Via, etc.)	<input type="checkbox"/>
Alternative options (public transportation, etc.) got worse or more expensive	<input type="checkbox"/>
Car purchase terms improved (loans, discounts, etc.)	<input type="checkbox"/>
Decrease in gas prices	<input type="checkbox"/>
Obtained driver's license	<input type="checkbox"/>
Family relationship change [show if a or b only]	<input type="checkbox"/>
Other <input type="text" value="Please Specify..."/>	<input type="checkbox"/>

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Why did you **start driving less** in the last two years?

Please select **up to three** primary reasons.

Reason	Selection
I didn't need to make as many trips	<input type="checkbox"/>
Other family members didn't need to make as many trips	<input type="checkbox"/>
Parking at home became harder or more expensive	<input type="checkbox"/>
Parking at work/school became harder or more expensive	<input type="checkbox"/>
Alternative options (public transportation, ride-hailing vehicle (Uber, Lyft, Via, etc.)) got better or cheaper	<input type="checkbox"/>
To save money/too expensive to keep and maintain car	<input type="checkbox"/>
Unable to keep up with loans/financing plan (repossession, etc.)	<input type="checkbox"/>
Lost driver's license	<input type="checkbox"/>
Relationship change [show if a or b only]	<input type="checkbox"/>
Other <input type="text" value="Please Specify..."/>	<input type="checkbox"/>

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Have you ever made money by **driving** for a ride-hailing company (Uber, Lyft, Via, etc.)?

- ☐ Yes— I have made money by driving for a ride-hailing company (Uber, Lyft, Via, etc.)
- ☐ No

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For the following time periods, how often did you drive your car for a ride-hailing company (Uber, Lyft, Via, etc.)?

Time Period	Never	Less than one day per month	1-3 days per month	1-2 days per week	3-4 days per week	5 or more days per week
Now	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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For the following time periods, how often did you make trips **in a carshare vehicle** (Zipcar, Car2Go, Enterprise CarShare, etc.)?

Time Period	Never	Less than one day per month	1-3 days per month	1-2 days per week	3-4 days per week	5 or more days per week
Now	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Currently, during what times of day do you typically make trips **in a carshare vehicle** (Zipcar, Car2Go, Enterprise CarShare, etc.)?

Please select all that apply.

Time Period	Weekdays (during the day)	Weeknights	Weekend days	Weekend nights
Now	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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For the following time periods, did you typically use a wheelchair to get around?

Time Period	No	Yes
Now	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>

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For the following time periods, how often did you make trips by **bike** (including your own bike or bikeshare, for trips over ¼ mile and excluding biking for exercise)?

Time Period	Never	Less than one day per month	1-3 days per month	1-2 days per week	3-4 days per week	5 or more days per week
Now	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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For the following time periods, did you have a bikeshare membership?

Time Period	Yes	No
Now	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>

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Currently, during what times of day do you typically make trips by **bike** (including your own bike or bikeshare, for trips over ¼ mile and excluding walking for exercise)?

Please select all that apply.

Time Period	Weekdays (during the day)	Weeknights	Weekend days	Weekend nights
Now	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Why did you **start biking more** in the last two years (including your own bike or bikeshare, for trips over ¼ mile and excluding walking for exercise)?

Please select up to **two** reasons.

Reason	Selection
Moved to a more bike-friendly location	<input type="checkbox"/>
Improvements to bicycle safety/comfort (bike lanes, buffers, traffic enforcement, etc.)	<input type="checkbox"/>
More destinations (shops, restaurants, etc.) moved within convenient biking distance	<input type="checkbox"/>
Alternative options (public transportation, driving, etc.) got worse or more expensive	<input type="checkbox"/>
Wanted to be more active	<input type="checkbox"/>
Bike-friendly facilities (bike racks, storage rooms, showers, etc.) improved at work, school, or other common destinations of mine	<input type="checkbox"/>
Bikeshare started operating near me	<input type="checkbox"/>
Other <input type="text" value="Please Specify..."/>	<input type="checkbox"/>

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For the following time periods, how often did you make {walkmode} trips (over ¼ mile and excluding walking for exercise)?

Time Period	Never	Less than one day per month	1-3 days per month	1-2 days per week	3-4 days per week	5 or more days per week
Now	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Currently, during what times of day do you typically make {walkmode} trips (over  $\frac{1}{4}$  mile and excluding walking for exercise)?

Please select all that apply.

Time Period	Weekdays (during the day)	Weeknights	Weekend days	Weekend nights
Now	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Why did you **start {walkmode} more** in the last two years (for trips over ¼ mile and excluding walking for exercise)? Please select up to **two** reasons.

Reason	Selection
Moved to a more pedestrian or wheelchair-friendly location	<input type="checkbox"/>
Improvements to safety/comfort (sidewalks, crosswalks, traffic enforcement, etc.)	<input type="checkbox"/>
More destinations (shops, restaurants, etc.) moved within a convenient distance	<input type="checkbox"/>
Alternative options (public transportation, driving, etc.) got worse or more expensive	<input type="checkbox"/>
Wanted to be more active	<input type="checkbox"/>
Other <input type="text" value="Please Specify..."/>	<input type="checkbox"/>

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**Almost done! We have just a few more questions about you. This information is to ensure we have a representative sample and will not be linked back to you.**

What is your gender?

☐ Female

☐ Male

☐ Other/Prefer to self-identify

Please Specify...



**\*Note:**

This information is only used to understand if we have received a representative sample of the region's population. Your answers will never be linked back to you and will only be analyzed with all other survey responses combined.

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Which of the following do you identify as? Select all that apply.

- ☐ African-American/African/Black
- ☐ Asian-American/Asian
- ☐ Caucasian/White
- ☐ Hispanic/Latino
- ☐ Native American or Alaska Native
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ Other



**\*Note:**

This information is only used to understand if we have received a representative sample of the region's population. Your answers will never be linked back to you and will only be analyzed with all other survey responses combined.

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Were you born in the United States?

☐ Yes

☐ No



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For the following time periods, how many family members lived in your household (including yourself)?

Time Period	1— I lived alone	2	3	4	5 or more
Now	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



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For the following time periods, how many family members under 18 years old lived in your household?

Time Period	None	1	2	3	4	5 or more
Now	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



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For the following time periods, what was your total annual household income?

Time Period	Under \$25k	\$25k-\$49,999	\$50k-\$74,999	\$75k-\$99,999	\$100k-\$124,999	\$125k-\$149,999	\$150k-\$174,999	\$175k-\$199,999	\$200k or above
Now	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Two years ago (Spring 2016)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



**\*Note:**

This information is only used to understand if we have received a representative sample of the region's population. Your answers will never be linked back to you and will only be analyzed with all other survey responses combined.

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**Thank you for participating! All of your responses have been saved, so you may now exit your browser.**

**Please provide any feedback you have regarding this survey.**

*Please click "Next" to submit your comment.*

*Please Specify...*

**Thank you very much for your time!**

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