



1. Please provide your city/town and zip code.

City/Town
ZIP/Postal Code

2. What is your age?

- Under 16 years
- 16 to 20 years
- 21 to 34 years
- 35 to 44 years
- 45 to 59 years
- 60 to 64 years
- 65 to 74 years
- 75 years and over

3. What is the highest level of education you have completed?

- Some high school
- Graduated from high school
- Some college
- Technical School
- Bachelor's degree
- Master's degree
- Doctoral degree

4. What is your annual household income?

- Less than \$15,000
- Between \$15,000 and \$24,999
- Between \$25,000 and \$34,999
- Between \$35,000 and \$49,999
- Between \$50,000 and \$74,999
- Between \$75,000 and \$99,999
- Between \$100,000 and \$149,999
- \$150,000 or more

5. Are you a military veteran?

- Yes
- No

6. Do you have any type of disability?

- Yes
- No

7. How many children under 18 live with you?

- No Children
- One Child
- Two Children
- Three Children
- More than three Children

8. Do you have access to a car?

- Yes, I own a car and drive myself
- Yes, a family member or friend has a car and drives me
- Yes, I borrow a car and drive myself
- No, I do not have access to a car



9. What are the top 3 destinations you want to go to but cannot due to lack of transportation?

- 1. _____
- 2. _____
- 3. _____

10. For the majority of your local trips, how do you travel? (Check all that apply)

- I drive myself
- Use public transportation (ATA, etc.)
- Ride in family / friend's vehicle
- Ride with volunteers / carpool
- Take a taxi
- Walk / bike
- Use a human service agency (Health-ride, nursing home, etc.)
- Other, please list:

11. Based on your experiences, please tell us which of the following challenges you have encountered using transportation services. (Check all that apply)

- Understanding program requirements
- Knowing what's available
- Unable to travel to transportation facilities
- Cost of transportation
- Difficulty connecting to other services
- Limited geographic coverage
- Operating hours of service

12. Please list the local services that you use. (ATA, senior center shuttle, etc.)

13. Please indicate your reasons if you have never used or no longer use public transportation. Check all that apply.

- Service is not frequent enough
- Travel takes too long
- Service is not offered to the sites I need
- Service is not reliable
- Fares are expensive
- Too far to walk to a bus stop
- I prefer to drive
- I am not aware of the services available
- Not applicable
- Other, please specify:

14. Have you considered relocating to an area with better transportation services? (i.e., move closer to town, hospitals, or a location that has more options to better suit your needs)

- Yes
- No



15. How do you find transportation services available to you? (Check all that apply)

- Senior Center
- Word of Mouth
- Internet Search
- Program Contact
- County Assistance Office
- PA211
- Other (please specify):

16. During the past year, what portion of your transportation did you drive yourself?

- 0%
- 10% - 25%
- 25% - 50%
- 50% - 75%
- 100%

17. During the past year, what portion of your transportation did your friends/family drive you?

- 0%
- 10% - 25%
- 25% - 50%
- 50% - 75%
- 100%

18. During the past year, what portion of your transportation did local services drive you? (ATA, health provider, etc.)

- 0%
- 10% - 25%
- 25% - 50%
- 50% - 75%
- 100%

19. What portion of your transportation would you like local services (ATA, health provider, etc.) to drive you?

- 0%
- 10% - 25%
- 25% - 50%
- 50% - 75%
- 100%

20. How much do you currently pay per one-way trip for public transportation? (This does not include rideshare trips)

- Nothing
- Less than \$1.00
- \$1.00 - \$1.50
- \$1.50 - \$2.00
- More than \$2.00

21. How much are you willing to spend on a one-way trip for public transportation? (This does not include rideshare trips)

- Less than \$1.00
- \$1.00 - \$1.50
- \$2.00 - \$2.50
- More than \$2.50



22. If you already use or were going to use public transportation, what is your main reason for traveling? (Please check one)

- Work
- Medical appointments
- Shopping
- Family / friend visits
- Entertainment
- Social service
- Education
- Religious
- Not Applicable
- Other, please specify:

23. When you travel, how long does it typically take you to get to your destination?

- 30 minutes or less
- 30 minutes to 1 hour
- 1 hour to 2 hours
- 2 hours or more

24. How long do you wait for transportation when returning home?

- 30 minutes or less
- 30 minutes to 1 hour
- 1 hour to 2 hours
- 2 hours or more

25. Please indicate, in the box below, the hours you most frequently travel or need to travel.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
12 A.M - 6 A.M.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6 A.M - 8 A.M.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8 A.M. - 12 P.M.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12 P.M. - 3 P.M.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3 P.M - 6 P.M.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6 P.M. - 9 P.M.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9 P.M. - 12 A.M.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

26. In the last six months, have any household members missed any of the following due to a lack of transportation? (Check all that apply)

- Work
- Medical appointments
- Shopping
- Family / friend visits
- Entertainment
- Social service
- Education
- Religious
- Not Applicable
- Other, please specify:

27. What government services do you participate in? (Check all that apply)

- Medicaid (Medical Assistance)
- Medicare
- Supplemental Nutritional Assistance Program (SNAP)
- Area Agency on Aging (AAA)
- Housing Assistance (HUD)
- Temporary Assistance for Needy Families (TANF)
- Childcare Subsidy (CCIS)
- Veterans Affairs (VA)
- Head Start
- CareerLink or other employment program
- None



28. Which of the following would be the best way to inform you about transportation services in your community? Check all that apply.

- Direct mailings to your home
- Newspaper
- Radio
- Television
- Websites
- Social media
- Inserts with your municipal bills
- Not interested
- Other (please specify):

29. What are some of your suggestions to improve transportation services?

30. If you would like us to keep you informed about additional opportunities for you to provide feedback, please provide your email address below.
