SURVEY ABOUT WALKING AND BIKING TO SCHOOL - FOR PARENTS -

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Dear Parent or Caregiver,

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Your child's school wants to learn your thoughts about children walking and biking to school. This survey will take about 5 - 10 minutes to complete. We ask that each family complete only one survey per school your children attend. If more than one child from a school brings a survey home, please fill out the survey for the child with the next birthday from today's date.

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After you have completed this survey, send it back to the school with your child or give it to the teacher. Your responses will be kept confidential and neither your name nor your child's name will be associated with any results. Thank you for participating in this survey!												
School Name:												
Completing this form: Please write with CAPITAL letters. Mark boxes with "X" instead of "\square".												
 What is the grade of the child who brought home this survey? (K – 8) grade Is the child who brought home this survey male or female?												
3. How many children do you have in Kindergarten through 8 th grade? children												
4. What is the street intersection nearest your home? (provide the names of two intersecting streets)												
AND												
5. How far does your child live from school? (choose one and mark box with X)												
a. less than 1/4		e. More than 2 miles										
☐ b. 1/4 mile up to	☐ b. 1/4 mile up to 1/2 mile ☐ d. 1 mile up to 2 miles ☐ f. Don't know											
6. On most days, how does your child arrive at school and leave for home after school? (select one choice per column, mark box with X)	Arrive at school □ a. Walk □ b. Bike □ c. School Bus □ d. Family vehicle (only with children from your family) □ e. Carpool (riding with children from other families) □ f. Transit (city bus, subway, etc.) □ h. Other (skateboard, scooter, inline skates, etc.)	Leave for home □ a. Walk □ b. Bike □ c. School Bus □ d. Family vehicle (only with children from your family) □ e. Carpool (riding with children from other families) □ f. Transit (city bus, subway, etc.) □ h. Other (skateboard, scooter, inline skates, etc.)										
7. How long does it normally take your child to get to/from school? (fill-in circle for one choice per column)	Travel time to school □ a. Less than 5 minutes □ b. 5 - 10 minutes □ c. 11 - 20 minutes □ d. More than 20 minutes □ e. Don't know / Not sure	Travel time from school □ a. Less than 5 minutes □ b. 5 - 10 minutes □ c. 11 - 20 minutes □ d. More than 20 minutes □ e. Don't know / Not sure										

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	8.	Has your child ask to/from school in t	walk or bil	(e	☐ YES	3	□ NO				
	9.	At what grade wou	ld you allow y <u>our</u> ch	nild to	walk or bi	ke with	out an	adul	t to/fron	n school?	
		(select a grade i	between K – 8) gra	ade	(or □ I wo	uld not	feel co	mfort	able at a	any grade)	
	10.	Which of the following issues affected your decision to allow, or not allow, your child to walk or bike to/from school? (select all that apply, mark with X in box)			 11. Would you probably let your child walk or bike to/from school if this problem were changed or improved? (select one choice per line) (□ My child already walks or bikes to/from school) 						
		Distance				YES		NO		Not Sure	
		Convenience of dr		YES		NO		Not Sure			
] Time				YES		NO		Not Sure	
		Child's before or a	s		YES		NO		Not Sure		
		Speed of traffic ald			YES		NO		Not Sure		
		Amount of traffic a			YES		NO		Not Sure		
		Adults to walk or b			YES		NO		Not Sure		
		Sidewalks or pathy	ways			YES		NO		Not Sure	
		Safety of intersections and crossings				YES		NO		Not Sure	
		Crossing guards			YES		NO		Not Sure		
		Violence or crime			YES		NO		Not Sure		
		Weather or climate		YES		NO		Not Sure			
	12.	2. In your opinion, how much does your child's school encourage or discourage walking and biking to/from school? (select one, mark with X in box)									1
	Str	ongly Encourage	Encourage	Neit	her		ourage □		Strongly	y Discourag □	е
	13.		walking or biking to			r your	child?	(seled	ct one)		
		Very Fun □	Fun □	Neu	ıtral T	В	oring		Ver	ry Boring □	
	14.	. How HEALTHY is	school for your child? (select one)								
					utral Unhealthy						
15. What is the highest grade or year of school you completed? (select one, mark with X in box											
☐ Grades 1 through 8 (Elementary) ☐ College 1 to 3 years (Some college or techr ☐ Grades 9 through 11 (Some high school) ☐ College 4 years or more (College graduate) ☐ Prefer not to answer											
16. Please provide any additional comments below:											
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