

APPENDIX A: ONBOARD SURVEY INSTRUMENT (ENGLISH)

Dear Rider: The City of Auburn requests your assistance in evaluating the community’s transit services. Your participation will help identify opportunities for improving or expanding transit service in the community. Please return the completed survey before you leave the bus today, or return by August 27 to be eligible for a random drawing for a VISA gift card. Thank you for your opinion!

Route:		Date:		Time:	
Tell Us About Your Trip Today					
1) Where did you board Auburn Transit for this trip? (Specify cross-streets and/or local landmark) Cross-streets: _____ and _____ Landmark: _____			2) Where did you exit Auburn Transit for this trip? (Specify cross-streets and/or local landmark) Cross-streets: _____ and _____ Landmark: _____		
3) How did you travel to the bus stop today? (choose one) <input type="checkbox"/> Transfer from another bus (Specify Route: _____) <input type="checkbox"/> Walk more than 3 blocks <input type="checkbox"/> Drive <input type="checkbox"/> Walk less than 3 blocks <input type="checkbox"/> Bicycle <input type="checkbox"/> Other (Specify) _____			4) What is the primary purpose of your trip today? (choose one) <input type="checkbox"/> Work <input type="checkbox"/> Recreation/Social <input type="checkbox"/> School <input type="checkbox"/> Access healthcare <input type="checkbox"/> Shopping <input type="checkbox"/> Other (Specify) _____		
5) Why did you choose Auburn Transit for this trip? (choose one) <input type="checkbox"/> Cost of service <input type="checkbox"/> Convenience <input type="checkbox"/> Lack of other travel options <input type="checkbox"/> Avoid traffic/parking <input type="checkbox"/> Environmental			6) How would you make this trip if Auburn Transit had not been available? (choose one) <input type="checkbox"/> Drive self <input type="checkbox"/> Would not make this trip <input type="checkbox"/> Walk or bicycle <input type="checkbox"/> Taxi <input type="checkbox"/> Friend or family <input type="checkbox"/> Other public transit service (Specify) _____		
7) Did you request a route deviation as part of this trip? <input type="checkbox"/> Yes, I called in. <input type="checkbox"/> Yes, I asked the driver. <input type="checkbox"/> No					
Please Tell Us About Our Service					
8) On a scale of 1 to 5 (1=Very dissatisfied, 5=Very satisfied) please indicate your satisfaction with the following Auburn Transit service attributes.			9) In the event you encountered a problem with Auburn Transit within the past 60 days, were you satisfied with the manner in which it was resolved? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Service Rating				
	Dissatisfied →		Satisfied		
a) Comfort onboard bus	1	2	3	4	5
b) Driver courtesy	1	2	3	4	5
c) Safety on bus	1	2	3	4	5
d) Availability of route/schedule info	1	2	3	4	5
e) Proximity of bus stop to home (starting point)	1	2	3	4	5
f) Proximity of bus stop to destination (end point)	1	2	3	4	5
g) On-time performance	1	2	3	4	5
h) Fare	1	2	3	4	5
i) Overall satisfaction	1	2	3	4	5
10) What service improvement would you most like to see made regarding Auburn Transit? (choose one) <input type="checkbox"/> More frequent service <input type="checkbox"/> Additional Saturday service <input type="checkbox"/> Newer busses <input type="checkbox"/> Sunday service <input type="checkbox"/> Later evening service <input type="checkbox"/> More routes/extended service area (Specify) _____			11) If the service change you identified in Question 10 was made, how would this impact your use of Auburn Transit? <input type="checkbox"/> No change <input type="checkbox"/> Increase by 3-4 trips per week <input type="checkbox"/> Increase by less than 1 trip per week <input type="checkbox"/> Increase by more than 5 trips per week <input type="checkbox"/> Increase by 1-2 trips per week		
12) If it became necessary to increase the Auburn Transit fare in order to introduce the change you identified in Question 10, would you be willing to pay: <input type="checkbox"/> 25 cents more? <input type="checkbox"/> 50 cents more? <input type="checkbox"/> Wouldn't support any fare increase					
Please Tell Us About You					
13) What fare category applies to you? <input type="checkbox"/> General <input type="checkbox"/> Senior/Disabled/Medicare <input type="checkbox"/> Child			14) How did you pay for this trip? <input type="checkbox"/> Cash fare <input type="checkbox"/> Day pass <input type="checkbox"/> 9 or 30 ride pass <input type="checkbox"/> Monthly pass		
15) How often do you ride Auburn Transit? <input type="checkbox"/> Less than once per month <input type="checkbox"/> 2-4 times per week <input type="checkbox"/> 1-4 times per month <input type="checkbox"/> 5 or more times per week			16) How long have you been riding Auburn Transit? <input type="checkbox"/> First time rider <input type="checkbox"/> 1 to 3 years <input type="checkbox"/> Less than 1 year <input type="checkbox"/> More than 3 years		
17) How do you typically obtain information about Auburn Transit services? <input type="checkbox"/> Call City Hall <input type="checkbox"/> City website <input type="checkbox"/> Social service agency <input type="checkbox"/> At the bus stop <input type="checkbox"/> Newspaper <input type="checkbox"/> Radio			18) Which of the following best describes you? <input type="checkbox"/> Employed full-time <input type="checkbox"/> Full-time student <input type="checkbox"/> Employed part-time <input type="checkbox"/> Visiting/not local resident <input type="checkbox"/> Not currently employed (seeking work) <input type="checkbox"/> Employed within the house <input type="checkbox"/> Retired <input type="checkbox"/> Military		
19) What is your annual household income? <input type="checkbox"/> Less than \$20,000 <input type="checkbox"/> \$34,001 - \$50,000 <input type="checkbox"/> \$20,000 - \$34,000 <input type="checkbox"/> More than \$50,000			20) Do you have a valid driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No		
21) Do you have ready access to a vehicle for personal use? <input type="checkbox"/> Yes <input type="checkbox"/> No			22) What is your age? <input type="checkbox"/> 16 years or younger <input type="checkbox"/> 26-44 years <input type="checkbox"/> 60 years or older <input type="checkbox"/> 17-25 years <input type="checkbox"/> 45-59 years		
To enter into the random drawing, please provide the following: Name: _____ Phone or E-mail: _____					