

CSULB Student Commuting Survey

Hi, I'm _____. I'm conducting a _____-minute survey about commuting to campus for a geography class. Would you be willing to participate?

[IF YES, CONTINUE] [IF NO, SAY THANK YOU FOR YOUR TIME.]

[RECORD NUMBER OF DECLINES TO PARTICIPATE _____]

Are you a student at CSULB?

[IF NO, SAY WE ARE JUST SURVEYING STUDENTS, BUT THANK YOU FOR YOUR TIME. HAVE A NICE DAY.]

The survey is confidential, which means your identity will not be linked to your answers. If there is any question that you don't feel comfortable answering, please say so and we'll move on.

SURVEY

I. What is the zip code of the place where you are currently living? Zip Code: _____

II. What is an intersection near where you are living?

Street name _____ Cross Street name _____

III. What form of transportation did you use each day you came to campus last week? (Check **one** form per day, specifically the form used to travel the farthest distance.) [INTERVIEWER SHOULD ENTER DATES IN SPACES UNDER DAYS OF THE WEEK]

	Mon _/_/_	Tue _/_/_	Wed _/_/_	Thurs _/_/_	Fri _/_/_
1. Walk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Skateboard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Bicycle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Campus Shuttle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Bus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Train or light rail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Motorcycle or scooter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Drive Alone (gas vehicle)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Drive Alone (hybrid vehicle)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Drive Alone (electric vehicle)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Get dropped off by private motor vehicle headed to non-campus location	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. 2 or more person carpool/vanpool	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Did not come to campus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[NOTE TO INTERVIEWER: VEHICLES INCLUDE CARS, TRUCKS, AND VANS. AN EXAMPLE OF A HYBRID IS A TOYOTA PRIUS. AN EXAMPLE OF AN ELECTRIC VEHICLE IS A CHEVY VOLT.]

- IV. When you chose your form of transportation, how important were the following factors in your decision?

	1. Not at all important	2. Somewhat important	3. Important	4. Extremely important
A. Travel distance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Physical fitness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Speed of travel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Cost of travel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Cost of parking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. Enjoyment of travel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. Environmental benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. Weather	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. Other _____ _____ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- V. How important does living close to campus factor into your choice to live where you currently do?

1. Not at all 2. Somewhat 3. Moderately 4. Extremely [CIRCLE ONE]

- VI. Do you enjoy your commute? 1. Yes 2. No [CIRCLE ONE]

[IF YES, ASK **A**] [IF NO, GO TO **B**]

A. What do you like about it?
B. What do you dislike about it?

VII. Would you consider using another form of transportation?

1. Yes

2. No

[CIRCLE ONE]

[IF YES, ASK A. AND B.]

[IF NO, GO TO #VIII]

	A. Which ones? [SELECT ALL THAT APPLY]	B. What would motivate you to switch to [MODE SELECTED]? [DO NOT READ SELECTIONS, JUST CLARIFY RESPONDENTS ANSWERS WITH SELECTIONS BELOW AND SELECT ALL THAT APPLY]
1. Walk	<input type="checkbox"/>	<input type="checkbox"/> A. Physical fitness benefits. <input type="checkbox"/> B. Environmental benefits. <input type="checkbox"/> C. If it was faster. <input type="checkbox"/> D. If it was less crowded. <input type="checkbox"/> E. If it reduced the cost of travel. <input type="checkbox"/> F. If it reduced the cost of parking. <input type="checkbox"/> G. If I lived closer. <input type="checkbox"/> H. If it was easier to access. <input type="checkbox"/> I. If I had more time. <input type="checkbox"/> J. If I owned this type of vehicle. <input type="checkbox"/> K. If I thought it was safe. <input type="checkbox"/> L. Other _____
2. Skateboard	<input type="checkbox"/>	<input type="checkbox"/> A. Physical fitness benefits. <input type="checkbox"/> B. Environmental benefits. <input type="checkbox"/> C. If it was faster. <input type="checkbox"/> D. If it was less crowded. <input type="checkbox"/> E. If it reduced the cost of travel. <input type="checkbox"/> F. If it reduced the cost of parking. <input type="checkbox"/> G. If I lived closer. <input type="checkbox"/> H. If it was easier to access. <input type="checkbox"/> I. If I had more time. <input type="checkbox"/> J. If I owned this type of vehicle. <input type="checkbox"/> K. If I thought it was safe. <input type="checkbox"/> L. Other _____
3. Bicycle	<input type="checkbox"/>	<input type="checkbox"/> A. Physical fitness benefits. <input type="checkbox"/> B. Environmental benefits. <input type="checkbox"/> C. If it was faster. <input type="checkbox"/> D. If it was less crowded. <input type="checkbox"/> E. If it reduced the cost of travel. <input type="checkbox"/> F. If it reduced the cost of parking. <input type="checkbox"/> G. If I lived closer. <input type="checkbox"/> H. If it was easier to access. <input type="checkbox"/> I. If I had more time. <input type="checkbox"/> J. If I owned this type of vehicle. <input type="checkbox"/> K. If I thought it was safe. <input type="checkbox"/> L. Other _____
4. Campus Shuttle	<input type="checkbox"/>	<input type="checkbox"/> A. Physical fitness benefits. <input type="checkbox"/> B. Environmental benefits. <input type="checkbox"/> C. If it was faster. <input type="checkbox"/> D. If it was less crowded. <input type="checkbox"/> E. If it reduced the cost of travel. <input type="checkbox"/> F. If it reduced the cost of parking. <input type="checkbox"/> G. If I lived closer. <input type="checkbox"/> H. If it was easier to access. <input type="checkbox"/> I. If I had more time. <input type="checkbox"/> J. If I owned this type of vehicle. <input type="checkbox"/> K. If I thought it was safe. <input type="checkbox"/> L. Other _____
5. Bus	<input type="checkbox"/>	<input type="checkbox"/> A. Physical fitness benefits. <input type="checkbox"/> B. Environmental benefits. <input type="checkbox"/> C. If it was faster. <input type="checkbox"/> D. If it was less crowded. <input type="checkbox"/> E. If it reduced the cost of travel. <input type="checkbox"/> F. If it reduced the cost of parking. <input type="checkbox"/> G. If I lived closer. <input type="checkbox"/> H. If it was easier to access. <input type="checkbox"/> I. If I had more time. <input type="checkbox"/> J. If I owned this type of vehicle. <input type="checkbox"/> K. If I thought it was safe. <input type="checkbox"/> L. Other _____
6. Train or light rail	<input type="checkbox"/>	<input type="checkbox"/> A. Physical fitness benefits. <input type="checkbox"/> B. Environmental benefits. <input type="checkbox"/> C. If it was faster. <input type="checkbox"/> D. If it was less crowded. <input type="checkbox"/> E. If it reduced the cost of travel. <input type="checkbox"/> F. If it reduced the cost of parking. <input type="checkbox"/> G. If I lived closer. <input type="checkbox"/> H. If it was easier to access. <input type="checkbox"/> I. If I had more time. <input type="checkbox"/> J. If I owned this type of vehicle. <input type="checkbox"/> K. If I thought it was safe. <input type="checkbox"/> L. Other _____

7. Motorcycle or scooter	<input type="checkbox"/>	<input type="checkbox"/> A. Physical fitness benefits. <input type="checkbox"/> B. Environmental benefits. <input type="checkbox"/> C. If it was faster. <input type="checkbox"/> D. If it was less crowded. <input type="checkbox"/> E. If it reduced the cost of travel. <input type="checkbox"/> F. If it reduced the cost of parking.	<input type="checkbox"/> G. If I lived closer. <input type="checkbox"/> H. If it was easier to access. <input type="checkbox"/> I. If I had more time. <input type="checkbox"/> J. If I owned this type of vehicle. <input type="checkbox"/> K. If I thought it was safe. <input type="checkbox"/> L. Other _____
8. Drive Alone (gas vehicle)	<input type="checkbox"/>	<input type="checkbox"/> A. Physical fitness benefits. <input type="checkbox"/> B. Environmental benefits. <input type="checkbox"/> C. If it was faster. <input type="checkbox"/> D. If it was less crowded. <input type="checkbox"/> E. If it reduced the cost of travel. <input type="checkbox"/> F. If it reduced the cost of parking.	<input type="checkbox"/> G. If I lived closer. <input type="checkbox"/> H. If it was easier to access. <input type="checkbox"/> I. If I had more time. <input type="checkbox"/> J. If I owned this type of vehicle. <input type="checkbox"/> K. If I thought it was safe. <input type="checkbox"/> L. Other _____
9. Drive Alone (hybrid vehicle)	<input type="checkbox"/>	<input type="checkbox"/> A. Physical fitness benefits. <input type="checkbox"/> B. Environmental benefits. <input type="checkbox"/> C. If it was faster. <input type="checkbox"/> D. If it was less crowded. <input type="checkbox"/> E. If it reduced the cost of travel. <input type="checkbox"/> F. If it reduced the cost of parking.	<input type="checkbox"/> G. If I lived closer. <input type="checkbox"/> H. If it was easier to access. <input type="checkbox"/> I. If I had more time. <input type="checkbox"/> J. If I owned this type of vehicle. <input type="checkbox"/> K. If I thought it was safe. <input type="checkbox"/> L. Other _____
10. Drive Alone (electric vehicle)	<input type="checkbox"/>	<input type="checkbox"/> A. Physical fitness benefits. <input type="checkbox"/> B. Environmental benefits. <input type="checkbox"/> C. If it was faster. <input type="checkbox"/> D. If it was less crowded. <input type="checkbox"/> E. If it reduced the cost of travel. <input type="checkbox"/> F. If it reduced the cost of parking.	<input type="checkbox"/> G. If I lived closer. <input type="checkbox"/> H. If it was easier to access. <input type="checkbox"/> I. If I had more time. <input type="checkbox"/> J. If I owned this type of vehicle. <input type="checkbox"/> K. If I thought it was safe. <input type="checkbox"/> L. Other _____
11. Get dropped off by private motor vehicle headed to non-campus location	<input type="checkbox"/>	<input type="checkbox"/> A. Physical fitness benefits. <input type="checkbox"/> B. Environmental benefits. <input type="checkbox"/> C. If it was faster. <input type="checkbox"/> D. If it was less crowded. <input type="checkbox"/> E. If it reduced the cost of travel. <input type="checkbox"/> F. If it reduced the cost of parking.	<input type="checkbox"/> G. If I lived closer. <input type="checkbox"/> H. If it was easier to access. <input type="checkbox"/> I. If I had more time. <input type="checkbox"/> J. If I owned this type of vehicle. <input type="checkbox"/> K. If I thought it was safe. <input type="checkbox"/> L. Other _____
12. 2 or more person carpool/vanpool	<input type="checkbox"/>	<input type="checkbox"/> A. Physical fitness benefits. <input type="checkbox"/> B. Environmental benefits. <input type="checkbox"/> C. If it was faster. <input type="checkbox"/> D. If it was less crowded. <input type="checkbox"/> E. If it reduced the cost of travel. <input type="checkbox"/> F. If it reduced the cost of parking.	<input type="checkbox"/> G. If I lived closer. <input type="checkbox"/> H. If it was easier to access. <input type="checkbox"/> I. If I had more time. <input type="checkbox"/> J. If I owned this type of vehicle. <input type="checkbox"/> K. If I thought it was safe. <input type="checkbox"/> L. Other _____
13. Other _____ _____ _____	<input type="checkbox"/>	<input type="checkbox"/> A. Physical fitness benefits. <input type="checkbox"/> B. Environmental benefits. <input type="checkbox"/> C. If it was faster. <input type="checkbox"/> D. If it was less crowded. <input type="checkbox"/> E. If it reduced the cost of travel. <input type="checkbox"/> F. If it reduced the cost of parking.	<input type="checkbox"/> G. If I lived closer. <input type="checkbox"/> H. If it was easier to access. <input type="checkbox"/> I. If I had more time. <input type="checkbox"/> J. If I owned this type of vehicle. <input type="checkbox"/> K. If I thought it was safe. <input type="checkbox"/> L. Other _____

VIII. How concerned are you about the environmental impacts of gas vehicles?

1. Not at all 2. Somewhat 3. Moderately 4. Very [CIRCLE ONE]

IX. What would be **the best way** to inform students of the different forms of transportation available to them? [CHECK **ONE** ONLY]

- ☐ 1. Email from University
- ☐ 2. Voice mail from University
- ☐ 3. Text message from University
- ☐ 4. BeachBoard Announcement
- ☐ 5. Banners around campus
- ☐ 6. Article in the Daily 49er newspaper
- ☐ 7. Information tables
- ☐ 8. Other: _____

X. Have you ever visited the CSULB Sustainable Transportation website (www.csulb.edu/rideshare)?

1. Yes 2. No [CIRCLE ONE]

Thank you for your time. Have a nice day.

QUESTIONS FOR INTERVIEWER TO COMPLETE AFTER CONDUCTING SURVEY:

I1. How many students declined to participate before the one who agreed to complete the survey? _____.

I2. Where did you conduct the interview? [Describe the location with cross-streets, building names, compass direction (NSEW) section of your assigned quadrant.]

I3. How many people were in this quadrat?

None Very few Some Many [CIRCLE ONE]

I4. Time of day interview was conducted _____ AM PM [CIRCLE ONE]