	Tell us about your commuting experiences. Only answer the questions that apply to you.
	* Required
	What school do you go to or work at? *
	○ GA Tech
	○ GSU
	○ Kennesaw
	OUGA
<b>1</b>	Other:
	How do you commute to and from campus?*
	I have a car and drive alone
	Carpool
	Public Transportation (e.g. Marta, Bus)
10	Bike
	Other:
	C dilai.
	What is your relationship with your school? If more than one
	applies to you, please choose the one you identify with most. *
	O Student
	O Faculty
	○ Staff
	Other:
	If you drive to school, what kind of vehicle do you drive?
	Small to mid-sized car
<b>1</b>	O Truck/SUV
	O Hybrid (all models)
	Electric (all models)
	Where do you commute from? (city) *
	Your answer
	How long is your daily commute? *
	O Less than 10 minutes
	O 10 - 29 minutes
_	O 30 minutes - 1 hour
•	O More than an hour
	What are the positive aspects of your commute? *
	Your answer
	Total diswell
	What are the negative aspects of your commute? *
	Your answer
	If you drive to school, where do you park?
	On campus
	Off campus but within walking distance
1	Other:
	If you drive alone, how much does your parking location cost you a year?
	Less than \$100
	© \$100 - \$299
	○ \$300 · \$499
	○ \$500 - \$749
	○ \$750 - \$1000
	O \$1000+
	How much money do you spend on gas a week?
	O Less than \$10
	O \$10-\$20
	O \$20 - \$30
	O \$30+
	If you were to carnool is there an error
	If you were to carpool, is there an arrangement you would be uncomfortable with? *
	Large age gap
	☐ Difference in occupation (student vs. faculty vs. staff)
	Complete strangers
	Opposite conder
	Opposite gender
•	Opposite gender  No preference
9	☐ No preference☐ Other:
9	│ No preference │ Other:  If you have experience with carpooling, please skip to
a	☐ No preference☐ Other:
	No preference Other:  If you have experience with carpooling, please skip to Section 3. If not, please proceed to Section 2.
	○ No preference     ○ Other:  If you have experience with carpooling, please skip to Section 3. If not, please proceed to Section 2.  NEXT
3	No preference Other:  If you have experience with carpooling, please skip to Section 3. If not, please proceed to Section 2.
	○ No preference     ○ Other:  If you have experience with carpooling, please skip to Section 3. If not, please proceed to Section 2.  NEXT

Commuter Survey

## Commuter Survey

Only answer the questions that apply to you.
If you usually drive alone to campus, why do you not carpool? (Please select up to 3)
☐ Transit service does not match my schedule
Difficult to find others to carpool
Cannot get home in an emergency
☐ I use my car at school
Prefer to drive my own car
☐ Safety concerns
If you are interested in carpooling, what aspects appeal to you most? (Please select up to 3)
☐ Better for the environment
☐ It's a cheaper option
☐ I don't like to commute alone
☐ I am not fond of other forms of public transportation (e.g. Marta)
I would like to utilize the carpool lane on the highway
Other:
If you have considered carpooling, what is most important to you about how you get to school? Check all that apply.    Travel time
Cost
Convenience/Flexibility
Reliability
Reducing pollution
Comfort and safety
Other:
If you have considered carpooling, how regularly would you be interested in carpooling?
O Few days a week
O Every weekday
O Every weekend
Other:
Thank you for your contribution! Please skip past section 3 and submit the survey!
BACK NEXT
Never submit passwords through Google Forms.

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## Commuter Survey

Section 3: Tell us about your experience with carpool.
Only answer the questions that apply to you.
What motivated you to carpool in the first place? Check all that apply.
☐ I wanted to cut financial costs
☐ I wanted to decrease my environmental impact
I did not have a vehicle of my own.
I wanted to use the carpool lane on the highway
Other:
Do you currently carpool?
O YES
O NO
If you no longer carpool, what motivated you to stop? Check all that apply and add your own reason.
My schedule no longer permitted me to carpool with my group
Members of my carpool either dropped out or were unreliable
Argument with any of the other carpoolers
Car accident
Other:
How do/did you carpool? (With friends, a service, etc. If you used a carpool service, please specify which service.)
Your answer
How often did you normally carpool?
O Few days a week
O Every weekday
O Every weekend
Other:
Describe your carpool arrangement (expenses, drivers, etc.)
Your answer
Did you consider your carpool arrangement to be ideal? What improvements could be made?
Your answer
What do/did you LIKE about carpooling?
Your answer
What do/did you DISLIKE about carpooling?
Your answer
When carpooling, were all of the seats filled? If not, specify how many seats were not in use.
○ Yes
Other:
Vous participation in the curvey is greatly expressisted!
Your participation in the survey is greatly appreciated! Please submit your results
BACK SUBMIT
Never submit passwords through Google Forms.