

NEW JERSEY SafeRoutes to School



To take this survey online, visit:

www.NJSafeRoutes.org

Dear Parent or Caregiver,

Your child's school has partnered with the NJ Department of Transportation, New Jersey's Transportation Management Associations, and researchers at Rutgers University to learn your thoughts about children walking and biking to school.

Purpose of Survey

Safe Routes to School (SRTS) is a nationwide effort to encourage more and safer walking and bicycling to school. The goal of this study is to understand any issues or concerns you have about allowing your child to walk or bike to and from school. The information gathered will be used to assess your local, state and national Safe Routes to School programs.

Please note that all responses will be kept anonymous and neither your name nor your child's name will be associated with any results. If you have any questions about your rights as a participant in this study, you may contact the Institutional Review Board administrator at Rutgers University at 848-932-0150.

Your participation in this study is completely voluntary; however, your opinions are highly valued. If you have any questions about the survey, please contact Leigh Ann Von Hagen of the NJ Safe Routes to School Resource Center at Rutgers University at lavh@ejb.rutgers.edu, or 848-932-7901.

Thank you for participating!

Sincerely,

Elise Bremer-Nei
State Safe Routes to School Coordinator
New Jersey Department of Transportation



RUTGERS
Edward J. Bloustein School
of Planning and Public Policy

Survey Directions

Please answer the questions below for your youngest elementary school child who attends grades 1 through 8. We ask that each family complete only one survey. This survey will take about 10-15 minutes to complete. Remember, all the requested information will be anonymous. To take this survey online, visit njsaferoutes.org.

1. What is the name of your child’s school? _____

2. In what grade is your child currently enrolled? _____

3. Is your child: Male Female

4. Does your school district provide your child with busing?

- Yes
- No

5. Does your child have a disability that prevents her/him from walking or biking to school?

- Yes
- No

6. What town do you live in? _____

7. What is the street intersection nearest your home? _____ and _____

8. During a typical 5-day school week, how many days does your child go to school and leave from school using these types of transportation:

	Walk	Bike	School Bus	Family Vehicle <i>(only children in your family)</i>	Carpool <i>(with children from another family)</i>	Public Transit <i>(city bus, subway, etc...)</i>	Other	Total = 5 days
EXAMPLE	2 days	1 day	2 days					= 5 days
Goes to School by...								= 5 days
Leaves from School by...								= 5 days

9. If your child walks or bikes to school, with whom do they usually travel? *(Check all that apply.)*

- Alone
- Parent or Guardian
- Other Children
- Sibling
- Other Adult
- My child does not walk or bike to school

10. Does your child have a bike that they can ride to school?

- Yes
- No

11. How many motor vehicles are kept at home for use by members of your household?

_____ vehicles

12. Currently, how important are the following in your decision to let your child walk or bike to school? Please indicate below how important each of the following factors affects your decision and in the last column on the right, please indicate which one factor is the most important.

Please indicate the one factor that is most important



	<i>Very Unimportant</i>	<i>Somewhat Unimportant</i>	<i>Neither Important or Unimportant</i>	<i>Somewhat Important</i>	<i>Very Important</i>	<i>Most Important Factor</i>
Distance to and from school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability of sidewalks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability of bike paths and/or trails	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability of bike parking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Amount of traffic on roads	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speed of traffic on roads	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability of crossing guards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Weather	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability of school bus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unsafe crossings or intersections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Currently, how important are the following in your decision to let your child walk or bike to school? Please indicate below how important each of the following factors affects your decision and in the last column on the right, please indicate which one factor is the most important.

Please indicate the one factor that is most important



	<i>Very Unimportant</i>	<i>Somewhat Unimportant</i>	<i>Neither Important or Unimportant</i>	<i>Somewhat Important</i>	<i>Very Important</i>	<i>Most Important Factor</i>
Age of my child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family schedule	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child's before and after school activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Weight of book bag	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability of adult supervision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bullying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal safety (theft, gangs, abandoned buildings, etc...)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
"Stranger Danger"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. Please tell us if there are any other important factors in your decision to let your child walk or bike to school?

15. To help us categorize the results, can you please tell us what is your total annual household income?

- Less than \$25,000
- \$25,000 to \$50,000
- \$50,000 to \$100,000
- \$100,000 to \$150,000
- \$150,000 or more