

1. How many children do you have attending school at XXXXX Elementary? \_\_\_\_\_

2. What is the street intersection nearest to your home?  
\_\_\_\_\_ and \_\_\_\_\_

3. How far do you live from school?  
 Less than ¼ mile     ½ mile up to 1 mile     More than 2 miles  
 ¼ mile up to ½ mile     1 mile up to 2 miles     Don't know

4. Do you feel this is within walking distance to school?     Yes     No

5. How often does your child walk or bike **to** school in the fall/spring?    \_\_\_\_\_ days/week

6. How often does your child walk or bike **to** school in the winter?    \_\_\_\_\_ days/week

7. How often does your child walk or bike **home** in the fall/spring?    \_\_\_\_\_ days/week

8. How often does your child walk or bike **home** in the winter?    \_\_\_\_\_ days/week

9. What types of barriers prevent your family from walking or biking to/from school? (please select all that apply)

- N/A since my child(ren) currently walk or bike to/from school
- Distance     Time     Crossing Roads     Traffic Concerns
- Walking Alone     Weather     Do Not Like to Walk     Health Issues
- Crossing Guards     Before/After School Activities     Potentially Unsafe Neighborhood

10. What would encourage your family to walk to/from school?

11. If there was a group of adult volunteers to walk groups of children to/from school, how likely is it that your child(ren) would participate in walking to school in the morning?

- Very Likely     Somewhat Likely     Unsure     Unlikely

12. If there was a group of adult volunteers to walk groups of children to/from school, how likely is it that your child(ren) would participate in walking home from school in the afternoon?

- Very Likely     Somewhat Likely     Unsure     Unlikely

13. How likely would you be to volunteer to walk children to/from school?

- Very Likely     Somewhat Likely     Unsure     Unlikely

14. I would like to be contacted for more information regarding the Walking School Bus program

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_