



Workplace Travel Survey

This is your chance to **have your say** about the journeys you make to enable us to develop policies and schemes based on the results of the survey.



Please complete in BLOCK CAPITALS using Black / Blue ink.

Section A - About you

1. Home Postcode
2. Gender Male 01
 Female 02
3. Age Under 25 01
 25 - 34 02
 35 - 44 03
 45 - 54 04
 55 or over 05

Section B - About your job

4. Company Name Site (if applicable)
5. Are you aware of your company's travel plan?
 Yes 01
 No 02
 Don't know 03
6. Do you normally work;
 Out of hours e.g. nights 01
 Normal working day 02
e.g. 8am-4pm, 9am- 5pm, 10am-6pm
 Other 03
Please specify
7. Is your work;
 Part time 01
 Full time 02
8. Which of the following best describes the level of skill related to your job?
 Professional/Managerial 01
 Office 02
 Qualified manual work 03
 Non qualified manual work 04
9. Would you be prepared to work from home?
 Yes 01
 Already do 02
 Unable to 03
 No, would not like to 04

Section C - About your travel to and from work

10. How do you travel to work?
- | | Usual
(please tick one) | Second choice
(please tick one) |
|--------------------|----------------------------|------------------------------------|
| Bus | <input type="checkbox"/> | <input type="checkbox"/> |
| Bicycle | <input type="checkbox"/> | <input type="checkbox"/> |
| Car, on your own | <input type="checkbox"/> | <input type="checkbox"/> |
| Car, with other(s) | <input type="checkbox"/> | <input type="checkbox"/> |
| Foot | <input type="checkbox"/> | <input type="checkbox"/> |
| Motorbike | <input type="checkbox"/> | <input type="checkbox"/> |
| Train | <input type="checkbox"/> | <input type="checkbox"/> |
| Other | <input type="checkbox"/> | <input type="checkbox"/> |

Please specify

11. What is your main reason for travelling to work this way? (tick three maximum)

- | | |
|--|----|
| <input type="checkbox"/> Car essential to perform job | 01 |
| <input type="checkbox"/> Dropping / collecting children | 02 |
| <input type="checkbox"/> Get a lift | 03 |
| <input type="checkbox"/> Health reasons e.g. fitness | 04 |
| <input type="checkbox"/> Lack of an alternative | 05 |
| <input type="checkbox"/> Mobility reasons e.g. registered disabled | 06 |
| <input type="checkbox"/> Cheaper than the alternative | 07 |
| <input type="checkbox"/> Personal safety | 08 |
| <input type="checkbox"/> Convenience | 09 |
| <input type="checkbox"/> I don't use public transport | 10 |
| <input type="checkbox"/> Available Parking | 11 |
| <input type="checkbox"/> Other | 12 |

Please specify

12. How far do you travel to work?

- | | |
|---|----|
| <input type="checkbox"/> Up to 1 mile | 01 |
| <input type="checkbox"/> Over 1 mile and up to 2 miles | 02 |
| <input type="checkbox"/> Over 2 miles and up to 4 miles | 03 |
| <input type="checkbox"/> Over 4 miles and up to 10 miles | 04 |
| <input type="checkbox"/> Over 10 miles and up to 20 miles | 05 |
| <input type="checkbox"/> Over 20 miles | 06 |

13. How long does it currently take you to get to work?

- | | |
|---|----|
| <input type="checkbox"/> 0 - 15 minutes | 01 |
| <input type="checkbox"/> 16 - 30 minutes | 02 |
| <input type="checkbox"/> 31 - 60 minutes | 03 |
| <input type="checkbox"/> 61 - 90 minutes | 04 |
| <input type="checkbox"/> Longer than 90 minutes | 05 |

14. Which of the following changes would encourage you to walk to work?

(if you already walk to work, which would you most like to see? - Please tick or specify)

| | Would definitely encourage me to walk to work | Might encourage me to walk to work | Would not encourage me to walk to work |
|--|---|------------------------------------|--|
| Safer, better lit worksite paths | | | |
| Improved paths on the journey to work | | | |
| Improved changing facilities & lockers at work | | | |
| Other (Please specify) | | | |

15. Which of the following changes would encourage you to cycle to work?

(if you already cycle to work, which would you most like to see? - Please tick or specify)

| | Would definitely encourage me to cycle to work | Might encourage me to cycle to work | Would not encourage me to cycle to work |
|--|--|-------------------------------------|---|
| Safer, better lit worksite cycle paths | | | |
| Improved cycle paths on the journey to work | | | |
| Improved cycle parking at workplace | | | |
| Improved cycle changing facilities & lockers at work | | | |
| Arrangements to buy a bicycle at a discount | | | |
| Free Adult cycle training | | | |
| Other (Please specify) | | | |

16. Which of the following changes would most encourage you to use public transport for your journey to work?

(if you already travel to work by public transport, which would you most like to see? - Please tick or specify)

| | Would definitely encourage me to use public transport to work | Might encourage me to use public transport to work | Would not encourage me to use public transport to work |
|---|---|--|--|
| More direct bus routes | | | |
| More frequent bus service | | | |
| Better lighting at bus shelters & workplace footpaths | | | |
| Discount tickets/passes available at work | | | |
| More convenient bus stop drop off points | | | |
| Better connection to work from the railway station | | | |
| Better connection from home to the railway station | | | |
| Public transport information | | | |
| Availability of park and ride | | | |
| Other (Please specify) | | | |

Please complete questions 17 – 19 if you use a car to get to work.

17. Where do you usually park?

- At worksite 01
- Free parking in nearby street 02
- Paid parking 03

18. Would you be prepared to car share?

- Yes 01
- No 02

If your answer is no, please say why

19. Which of the following would most encourage you to car share?

| | Would definitely encourage me to car share to work | Might encourage me to car share to work | Would not encourage me to car share to work |
|---|--|---|---|
| Help in finding car share partners with similar work patterns | | | |
| Free taxi home if let down by car driver | | | |
| Reserved parking for car sharers | | | |
| Reduced car parking charges for car sharers | | | |
| Other (Please specify) | | | |

20. Do you have any comments about your travel to work patterns?

Thank you for your co-operation. Please be assured that all your answers will remain confidential.

Please return this form to

Name At By



Data Protection Act 1998

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