

**Parent travel to school survey**

We are working towards our next Modeshift STARS award for road safety and active travel promotion. In order to do so we would like to ask you a few questions about your child’s journey to school. We would appreciate it if you could take the time to complete this questionnaire.

**School…………………………………………… Date ………………………**

**Year group of child…………………………………………**

**Q1** How does your child travel to and from school? Please tick all appropriate

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Summer months | | | | Winter months | | | |
| Occasionally | 1-2 days a week | 3-4 days a week | 5 days a week | Occasionally | 1-2 days a week | 3-4 days a week | 5 days a week |
| Walk |  |  |  |  |  |  |  |  |
| Cycle |  |  |  |  |  |  |  |  |
| Car |  |  |  |  |  |  |  |  |
| Scooter |  |  |  |  |  |  |  |  |
| Park & Stride\* |  |  |  |  |  |  |  |  |
| Bus |  |  |  |  |  |  |  |  |
| Tram/train |  |  |  |  |  |  |  |  |
| Other  (please state) |  |  |  |  |  |  |  |  |

**Q2** How would you prefer your child to travel to and from school? Please tick all appropriate

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Summer months | | | | Winter months | | | |
| Occasionally | 1-2 days a week | 3-4 days a week | 5 days a week | Occasionally | 1-2 days a week | 3-4 days a week | 5 days a week |
| Walk |  |  |  |  |  |  |  |  |
| Cycle |  |  |  |  |  |  |  |  |
| Car |  |  |  |  |  |  |  |  |
| Scooter |  |  |  |  |  |  |  |  |
| Park & Stride\* |  |  |  |  |  |  |  |  |
| Bus |  |  |  |  |  |  |  |  |
| Tram/train |  |  |  |  |  |  |  |  |
| Other  (please state) |  |  |  |  |  |  |  |  |

\*Park & Stride: Drive to school but park at least 5 minutes away from school and walk the final part of the journey.

**Q3** How far do you live from school?.............................miles

**Q4** Does your child travel independently / with an adult (please circle)

**Q5 if appropriate:** Which entrance do you use to enter school (give multiple choice

**Q6** Why do you and your child choose to travel the way you do? Please tick all that apply

|  |  |  |  |
| --- | --- | --- | --- |
|  | Easy/convenient |  | My child enjoys it |
|  | Cheap |  | Quick |
|  | Keeps my child healthy |  | Good for the environment |
|  | Live too far for any other mode of travel |  | I have lots to go on to work |
|  | Other (please state) | | |

**Q7** If you would like to travel more actively/sustainably, what barriers do you face which may prevent or make this harder for you to do? Please tick all that apply

|  |  |  |  |
| --- | --- | --- | --- |
|  | Distance |  | Would take too long |
|  | Not a suitable route |  | Wouldn’t feel safe |
|  | Facilities not available e.g. shower/lockers |  | Road crossings |
|  | My child can’t ride a bike/or doesn’t feel confident |  |  |
|  | Other (please state) | | |

**Q8** If you have any other comments ideas about active school travel please comment here

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Thank you for completing this survey. Please return it to ……………………………………