

GSA/Volpe Advanced Methodology Commuter Survey: Intro Page



GSA Carbon Footprint Tool

Welcome to the Employee Survey

This employee commuter survey was developed through a collaboration between GSA and the Department of Transportation's Volpe Center. This survey collects employee commuting data for your organization in order to calculate indirect emissions from employee commuting. The results of this survey will allow your organization to analyze cause and effect relationships of different commuting scenarios.

The employee survey supports browsers Internet Explorer 7 and Mozilla Firefox 3 and above.

Enter your survey code here to begin:

Start



Page 1 of 9 - Operating Administration & Workplace Information

1. Please select your operating administration or office:

Please enter your organization code or other office identification code used by your agency. If you are not sure what to enter in this field, please leave it blank.

2. What is the five-digit zip code at your primary duty station? (e.g., 20590, 02142)

3. What is your employment status?

- Federal Government Employee
- Federal Government on-site Contractor
- Other (e.g., contractor not working within a Federally operated building)

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4. How did you travel TO WORK each day during a TYPICAL week? If you select "N/A" for transportation method, select "N/A" for # Miles.

	1st Method of Transportation	# Miles	2nd Method of Transportation (optional)	# Miles	3rd Method of Transportation (optional)	# Miles
Monday	Car (drove alone) ▼	▼	▼	▼	▼	▼
Tuesday	▼	▼	▼	▼	▼	▼
Wednesday	▼	▼	▼	▼	▼	▼
Thursday	▼	▼	▼	▼	▼	▼
Friday	▼	▼	▼	▼	▼	▼

If "other" selected, please indicate method of transportation:

5. What is the average total number of people in the Carpool/Vanpool you selected above, including yourself? (Select "N/A" if not applicable.)

6. Did you use the same method(s) of transportation indicated above to commute FROM WORK at the end of your workdays? (If you answer "Yes", you will skip the next section. This may conclude your survey.)

- Yes
- No

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7. How did you travel FROM WORK each day during a TYPICAL week? If you select "N/A" for transportation method, select "N/A" for # Miles.

	1st Method of Transportation	# Miles	2nd Method of Transportation (optional)	# Miles	3rd Method of Transportation (optional)	# Miles
Monday	Car (drove alone) <input type="text"/>	N/A <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Tuesday	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Wednesday	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Thursday	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Friday	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If "other" selected, please indicate method of transportation:

8. What is the average total number of people in the Carpool/Vanpool you selected above, including yourself? (Select "N/A" if not applicable.)



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9. Thinking about last year, what would you say is your PRIMARY commuting method?

- Car (drove alone)
- Truck/SUV/Van (drove alone)
- Motorcycle
- Carpool/Vanpool
- Bicycle
- Walk
- Transit bus
- Transit rail (e.g. subway)
- Commuter rail (e.g. regional)
- Intercity rail (e.g. Amtrak)
- Other (e.g. telework full-time)

If "other" selected, please indicate commuting method:

Question #9 is no longer available.

10. How often do you typically spend a full workday teleworking?

- Five times a week
- Four times a week
- Three times a week
- Twice a week
- Once a week
- Once or twice a month
- Less than once a month
- I did not telework because I must be physically present on the job (e.g., Law Enforcement)
- I did not telework because I have technical issues (e.g., connectivity problems) that prevented me from teleworking
- I did not telework because I was not allowed to, even though I have the kind of job where I can telework
- I did not telework because I chose not to telework

11. Think about how you felt during your commute over the TYPICAL WEEK. How much did you feel the following while commuting?

- | | | | | | | |
|----------|---|---|---|---------------------------------------|--|--------------------------------------|
| Relaxed | <input checked="" type="radio"/> Not at all | <input type="radio"/> Slightly | <input type="radio"/> Moderately | <input type="radio"/> Very | <input type="radio"/> Extremely | <input type="radio"/> N/A |
| Annoyed | <input type="radio"/> Not at all | <input checked="" type="radio"/> Slightly | <input type="radio"/> Moderately | <input type="radio"/> Very | <input type="radio"/> Extremely | <input type="radio"/> N/A |
| Tense | <input type="radio"/> Not at all | <input type="radio"/> Slightly | <input checked="" type="radio"/> Moderately | <input type="radio"/> Very | <input type="radio"/> Extremely | <input type="radio"/> N/A |
| Angry | <input type="radio"/> Not at all | <input type="radio"/> Slightly | <input type="radio"/> Moderately | <input checked="" type="radio"/> Very | <input type="radio"/> Extremely | <input type="radio"/> N/A |
| Calm | <input type="radio"/> Not at all | <input type="radio"/> Slightly | <input type="radio"/> Moderately | <input type="radio"/> Very | <input checked="" type="radio"/> Extremely | <input type="radio"/> N/A |
| Stressed | <input type="radio"/> Not at all | <input type="radio"/> Slightly | <input type="radio"/> Moderately | <input type="radio"/> Very | <input type="radio"/> Extremely | <input checked="" type="radio"/> N/A |

12. What time did you ARRIVE at and LEAVE work each day during a TYPICAL WEEK?

	ARRIVE AT WORK	LEAVE WORK
Monday	<input type="text" value="Before 6:00AM"/>	<input type="text" value="Before 3:00PM"/>
Tuesday	<input type="text" value="N/A"/>	<input type="text" value="N/A"/>
Wednesday	<input type="text" value="N/A"/>	<input type="text" value="N/A"/>
Thursday	<input type="text" value="N/A"/>	<input type="text" value="N/A"/>
Friday	<input type="text" value="N/A"/>	<input type="text" value="N/A"/>

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13. Please estimate your commute time TO WORK under the following conditions: (Full-time teleworkers, enter 0.)

Minutes commuting TO WORK on a GOOD day?

minutes

Minutes commuting TO WORK on an AVERAGE day?

minutes

Minutes commuting TO WORK on a BAD day?

minutes

14. Please estimate your commute time TO HOME under the following conditions: (Full-time teleworkers, enter 0.)

Minutes commuting TO HOME on a GOOD day?

minutes

Minutes commuting TO HOME on an AVERAGE day?

minutes

Minutes commuting TO HOME on a BAD day?

minutes

15. What would you consider to be a REASONABLE number of minutes to spend commuting one-way on a regular basis?

minutes

16. What is the MAXIMUM number of minutes you would be willing to spend commuting one-way on a regular basis?

minutes

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17. Overall, how satisfied are you with the following?

- Your commute to work Very dissatisfied Somewhat dissatisfied Neither satisfied nor dissatisfied Somewhat satisfied Very satisfied N/A
- Your commute to home Very dissatisfied Somewhat dissatisfied Neither satisfied nor dissatisfied Somewhat satisfied Very satisfied N/A
- Your agency's telework program Very dissatisfied Somewhat dissatisfied Neither satisfied nor dissatisfied Somewhat satisfied Very satisfied N/A
- Your agency's alternative work schedule (AWS) program Very dissatisfied Somewhat dissatisfied Neither satisfied nor dissatisfied Somewhat satisfied Very satisfied N/A

18. Would you consider commuting to work using the following forms of transportation?

- Carpool or vanpool Already using this mode Yes, I would consider it I might consider it No, I would not consider it Not applicable to me
- Public transit bus Already using this mode Yes, I would consider it I might consider it No, I would not consider it Not applicable to me
- Public transit rail Already using this mode Yes, I would consider it I might consider it No, I would not consider it Not applicable to me
- Commuter rail Already using this mode Yes, I would consider it I might consider it No, I would not consider it Not applicable to me
- Walk Already using this mode Yes, I would consider it I might consider it No, I would not consider it Not applicable to me
- Bicycle Already using this mode Yes, I would consider it I might consider it No, I would not consider it Not applicable to me

19. Do you use any of the following commuting and work scheduling options that may be offered by your employer?

- Flexible work hours (Flextime) Use and Satisfied Would use more if improved Would use if provided Available, no personal need Not available, no personal need
- Compressed work week Use and Satisfied Would use more if improved Would use if provided Available, no personal need Not available, no personal need
- Transit benefit program Use and Satisfied Would use more if improved Would use if provided Available, no personal need Not available, no personal need
- Emergency ride home program Use and Satisfied Would use more if improved Would use if provided Available, no personal need Not available, no personal need
- Parking benefit Use and Satisfied Would use more if improved Would use if provided Available, no personal need Not available, no personal need
- Preferred parking for carpools/vanpools Use and Satisfied Would use more if improved Would use if provided Available, no personal need Not available, no personal need
- Electric vehicle charging station Use and Satisfied Would use more if improved Would use if provided Available, no personal need Not available, no personal need
- Bike commuter benefit program Use and Satisfied Would use more if improved Would use if provided Available, no personal need Not available, no personal need
- Covered and secure bike storage Use and Satisfied Would use more if improved Would use if provided Available, no personal need Not available, no personal need
- Showers for walkers and bikers Use and Satisfied Would use more if improved Would use if provided Available, no personal need Not available, no personal need
- Ride board or digital resources to coordinate carpooling Use and Satisfied Would use more if improved Would use if provided Available, no personal need Not available, no personal need
- Telework policy Use and Satisfied Would use more if improved Would use if provided Available, no personal need Not available, no personal need
- Telework technology Use and Satisfied Would use more if improved Would use if provided Available, no personal need Not available, no personal need

20. What is the 5-digit zip code where you live? (e.g. 02134, 02142)



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21. On average, how many hours do you work per week?

40

22. What is your age? (please select appropriate range)

18-25 years

23. What is your gender?

- Male
- Female

24. How many years have you worked for this agency? (please select appropriate range)

1-5 years

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25. How many years have you lived at your current residence? (please select appropriate range)

6-10 years

26. What is the estimated distance between your home and the nearest public transit station or bus stop?

- Less than 0.25 mile
- 0.25 to 0.5 mile
- 0.5 to 1 mile
- 1 mile to 1.5 miles
- 1.5 miles to 2 miles
- More than 2 miles
- Don't know or not sure

27. Specify the type of vehicle you drive to work (including a vehicle you use in a carpool/vanpool). Select "N/A" if not applicable.

YEAR MAKE VEHICLE FUEL TYPE

Vehicle Type

Please type the model of your vehicle (optional)

28. Is there any information you would like to add about your commute that was not addressed in this survey?



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29. Were the survey questions clear?

- Yes. I understood all of the questions without any problems.
- Yes, but a few of the questions were confusing.
- No.

30. Did you experience any technical problems while taking this survey?

- Survey site was slow to load some/all questions
- I was unable to connect to the survey on my first try
- My survey link did not work
- I had another technical problem not addressed here
- I did not have any technical problems

31. How was your overall experience with this survey?

- Favorable. I did not experience any problems.
- Neutral. I had a few problems with the survey, but no major problems.
- Unfavorable. I had significant problems with the survey.

Previous Finish