

Human Services Transportation Plan

Employer Survey

1. Do you have employees with regular or frequent transportation issues?
 - No employees have transportation issues
 - 1-5
 - 6-10
 - 11-15
 - More than 15
2. Do you have employees that rely on other people for transportation to work?
 - None
 - 1-5
 - 6-10
 - 11-15
 - More than 15
3. Do you think these employees would benefit from public transportation?
 - Yes
 - No
4. What is their estimated annual income? (Please check all that apply.)
 - Less than \$25,000
 - \$26,000 - \$50,000
 - More than \$50,000
5. Would your organization be willing to have a "transportation stop" at your facility?
 - Yes
 - No
6. How many people leave employment with your organization annually due to a lack of transportation?
 - None
 - 1-5
 - 6-10
 - 11-15
 - More than 15
7. How many days per year do your employees miss due to transportation issues (total of all employees)?
 - 1-5
 - 6-10
 - 11-15
 - 16-20
 - More than 20