# APPENDIX F. DATA COLLECTION INSTRUMENTS

This Appendix includes the surveys instruments used to collect evaluation data for the 2018-19 Alameda County SR2S Program.

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<td>24</td>
</tr>
<tr>
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<td>25</td>
</tr>
</tbody>
</table>
Student Hand Tally

**Student Travel Tally**

<table>
<thead>
<tr>
<th>Weather</th>
<th>Walk</th>
<th>Bike</th>
<th>School Bus</th>
<th>Family Vehicle</th>
<th>Carpool (with children from outside their household)</th>
<th>Public Transit (bus, BART, etc.)</th>
<th>Other (skateboard, scooter, etc.)</th>
<th># Absent</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sunny</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rainy</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overcast</td>
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<td></td>
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<td></td>
<td></td>
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<tr>
<td>Frost</td>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

1. Please note the weather.
2. Read all choices aloud before asking students to raise their hands. Please explain that riding in a car to school with a relative counts as carpooling if you don’t both live at the same house. Please ask your students how they arrived at school yesterday and how they got home yesterday. Then please ask your students how they arrived at school today and how they plan to get home.
3. Check to confirm that the total for each row matches the total number of students enrolled.

List any disruptions, scheduled activities, or unusual travel conditions before or after school that may impact these counts.

Please complete survey and return to the Alameda County Safe Routes to Schools program by April 29, 2019.

Thanks for your participation!
High School Arrival and Departure Survey

Name of School/Event: ____________________________

Date ______________

Grade ____

Please circle one option on each line:

<table>
<thead>
<tr>
<th>How did you get to school today?</th>
<th>Walk</th>
<th>Bike</th>
<th>School Bus</th>
<th>Family Car (dropped off at school)</th>
<th>Drove Yourself</th>
<th>Carpool (riding with students you don’t live with)</th>
<th>Public Transit (bus, BART, etc.)</th>
<th>Other (skate, scooter, etc.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>How will you go home today?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How did you get to school yesterday?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>How did you get home yesterday?</td>
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</tr>
</tbody>
</table>

Parent/Caregiver Survey

Also available in Chinese and Spanish
Parent/Caregiver Survey

Thank you for participating in Safe Routes to Schools!
Please fill out this brief survey to help us improve the program. If you have multiple students at the same school, please complete the survey for the child that brought this home.
Please return this survey by April 26 or earlier.

1. What grade is your child in?

2. What school does your child attend?

3. What is your child's gender?

4. What is the approximate distance from your home to your child's school?  
   - ¼ mile or less
   - ¼ mile to ½ mile
   - ½ mile to 1 mile
   - 1-2 miles
   - More than two miles (please specify):

5. How did this child travel TO school last week?

<table>
<thead>
<tr>
<th></th>
<th>Walk</th>
<th>Bike</th>
<th>Family Car (your kids only)</th>
<th>Carpool (with other kids not from the same household)</th>
<th>School bus</th>
<th>Public transit (bus, BART, etc.)</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tuesday</td>
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<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Wednesday</td>
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<td></td>
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<tr>
<td>Thursday</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Friday</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

6. How did this child travel FROM school last week?

<table>
<thead>
<tr>
<th></th>
<th>Walk</th>
<th>Bike</th>
<th>Family Car (your kids only)</th>
<th>Carpool (with other kids not from the same household)</th>
<th>School bus</th>
<th>Public transit (bus, BART, etc.)</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tuesday</td>
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<tr>
<td>Wednesday</td>
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<td>Thursday</td>
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<tr>
<td>Friday</td>
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<td></td>
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</tr>
</tbody>
</table>

7. Do you allow this student to travel to school in the following ways?

<table>
<thead>
<tr>
<th></th>
<th>Yes, by themselves</th>
<th>Yes, with a friend or sibling</th>
<th>Yes, with a trusted adult</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Walk</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bike</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family Car (your kids only)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carpool (with other kids not from the same household)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>School bus</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Public transit (bus, BART, etc.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
8. How strongly do you agree or disagree with the following statements:

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly agree</th>
<th>Somewhat agree</th>
<th>Neutral</th>
<th>Somewhat disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Walking/biking to school is...</td>
<td>...fun for my child</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>...important for my child’s health</td>
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<td></td>
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<td></td>
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<tr>
<td></td>
<td>...encouraged by my child’s school</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td></td>
<td>...something I wish we did more often</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

9. Did you or your child walk/bike more often after participating in the following activities/events?

<table>
<thead>
<tr>
<th>Activity/Event</th>
<th>Yes, a lot more</th>
<th>Yes, somewhat more</th>
<th>No, but we’d like to</th>
<th>No and don’t intend to</th>
<th>We didn’t participate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pedestrian safety education (Safe Moves City)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Walking School Bus/Bike Train</td>
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<td></td>
</tr>
<tr>
<td>Bike safety education (bike rodeo/Drive Your Bike)</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Countywide events (International Walk and Roll to School Day, Golden Sneaker Contest, Coca for Carpoolls, Bike to School Day)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family Biking Workshop</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Walk &amp; Roll Assembly</td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>Ongoing walk &amp; roll event at your school (e.g., monthly or weekly walk to school day, etc.)</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>BikeMobile visit (my child’s bike was repaired by BikeMobile staff)</td>
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</tr>
</tbody>
</table>

10. What concerns limit your child’s ability to walk or bike to/from school? (please select up to three concerns)

- Takes too long to walk or bike to school
- Driving is more convenient
- Bad weather
- Speeding cars
- No crossing guards
- Child’s before or after school activities
- Poor driving behavior on streets near school (distracted driving, speeding, not yielding at crosswalks)
- Don’t know the best route
- I have to drop another sibling off at a different school.

- Lack of facilities (no sidewalks, bike paths, or routes; sidewalks or bike routes are not continuous, or are in need of repair; street crossings are unsafe)
- Lack of bike parking, bike parking not secure, or not in a convenient location
- Concerns about criminal activity (stranger danger, gangs, violence, or dogs)
- Concerns about bullying
- Other (please specify): ____________

11. What is the top reason why you walk/bike with your family or would consider it?

- Reducing driving minimizes crashes and congestion
- I want to spend more time with my family
- Walking and biking is the most affordable option
- Other ____________
- None of the above- not interested in walking or biking.

12. Would you like to get involved in SR257? Select how you can volunteer and provide your contact information below.

- Volunteer for events and contests, such as Bike to School Day or Golden Sneaker Contest
- Help organize a neighborhood Walking School Bus or Bike Train

Name: ______________________  Email: ______________________
**School Administrator Survey**

Thank you for participating in Safe Routes to Schools! Please fill out this brief survey to help us improve the program.

**Date:**

<table>
<thead>
<tr>
<th>1. School Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. School District:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. How long have you partnered with the Alameda County SRTS program?</th>
</tr>
</thead>
<tbody>
<tr>
<td>This is my school's first year</td>
</tr>
<tr>
<td>--------------------------------</td>
</tr>
<tr>
<td>No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. Do you have a staff person with time dedicated to the SRTS program?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>--------------------------------</td>
</tr>
<tr>
<td>Number of people:</td>
</tr>
<tr>
<td>Number of people:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5. Does your school have a parent volunteer/champion dedicated to the SRTS program?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>--------------------------------</td>
</tr>
<tr>
<td>Number of volunteers:</td>
</tr>
<tr>
<td>Number of volunteers:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6. How effective are the following Safe Routes to Schools program activities at IMPROVING SAFETY?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rank each program activity from 1 to 5, with 1 being very ineffective and 5 being very effective.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Very ineffective</td>
</tr>
<tr>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>b. Walking School Buses/Bike Trains</th>
</tr>
</thead>
<tbody>
<tr>
<td>My school has never participated in this activity</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>c. Ongoing activities (monthly or weekly Walk &amp; Roll to School Days)</th>
</tr>
</thead>
<tbody>
<tr>
<td>My school has never participated in this activity</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>d. Safety education/hands-on training (bicycle and pedestrian rodeos and safety courses, Drive Your Bike)</th>
</tr>
</thead>
<tbody>
<tr>
<td>My school has never participated in this activity</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>e. In-classroom curriculum and Walk &amp; Roll assemblies</th>
</tr>
</thead>
<tbody>
<tr>
<td>My school has never participated in this activity</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>f. BikeMobile visits (free bike repair)</th>
</tr>
</thead>
<tbody>
<tr>
<td>My school has never participated in this activity</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>g. School Safety Assessment (walk audit)</th>
</tr>
</thead>
<tbody>
<tr>
<td>My school has never participated in this activity</td>
</tr>
</tbody>
</table>
7. **How effective are the following Safe Routes to Schools program activities at GETTING STUDENTS TO BIKE, WALK, CARPOOL, OR TAKE PUBLIC TRANSIT TO SCHOOL?**

   *Rank each program activity from 1 to 5, with 1 being very ineffective and 5 being very effective.*

<table>
<thead>
<tr>
<th>Activity</th>
<th>Very ineffective</th>
<th>Somewhat ineffective</th>
<th>Neutral</th>
<th>Somewhat effective</th>
<th>Very effective</th>
<th>My school has never participated in this activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Countywide events (International Walk &amp; Roll to School Day, Golden Sneaker Contest, Bike to School Day, Cocoa for Carpool)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>My school has never participated in this activity</td>
</tr>
<tr>
<td>b. Walking School Buses/Bike Trains</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>My school has never participated in this activity</td>
</tr>
<tr>
<td>c. Ongoing activities (monthly or weekly Walk &amp; Roll to School Days)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>My school has never participated in this activity</td>
</tr>
<tr>
<td>d. Safety education/hands-on training (bicycle and pedestrian rodeos and safety courses, Drive Your Bike)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>My school has never participated in this activity</td>
</tr>
<tr>
<td>e. In-classroom curriculum and Walk &amp; Roll assemblies</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>My school has never participated in this activity</td>
</tr>
<tr>
<td>f. BikeMobile visits (free bike repair)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>My school has never participated in this activity</td>
</tr>
<tr>
<td>g. School Safety Assessment (walk audit)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>My school has never participated in this activity</td>
</tr>
</tbody>
</table>

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8. **How do you typically receive information about upcoming SR2S activities?**

   During SR2S Task Force Meetings | Through the SR2S Online Resource Center | Via emails from the SR2S program or SR2S champion | In one-on-one meetings with SR2S site coordinators | Other: __________

9. **How frequently do you use the Alameda County SR2S Online Resource Center (alamedacountyrs2s.org)?**

   A few times a year | A few times per month | Monthly | Weekly | Never |

10. **What do you primarily use the Alameda County SR2S Online Resource Center for?**

   Find out about upcoming events | Download materials for events | Request activities | Find out about the next Task Force meeting | Other: __________

11. **How can the Alameda County SR2S program be improved to better meet the needs of your school and better encourage active (walking, biking) and shared (carpooling, public transit) transportation?**
School Champion Survey

Thank you for participating in Safe Routes to Schools! Please fill out this brief survey to help us improve the program.

Date: _______________________

1. At what school are you a SR2S Champion?

2. School District:

3. How long have you been a SR2S Champion?
   - This is my first year
   - 1-2 years
   - 3-4 years
   - 5+ years

4. Do you attend Task Force meetings in your district?
   - Yes
   - No
   - Sometimes
   - I don’t know when Task Force meetings are scheduled

5. If you have attended at least one Task Force meeting, how helpful was the meeting?
   - Very helpful
   - Somewhat helpful
   - Not helpful at all

6. How often do you use the Alameda County SR2S Online Resource Center (alamedacountyrs2s.org)?
   - A few times a year
   - Monthly
   - A few times per month
   - Weekly

7. What obstacles, if any, have prevented you from organizing SR2S activities at your school? Select all that apply.
   - Lack of funding
   - Lack of City staff support
   - Lack of community support
   - Lack of parent support or interest
   - Unsupportive school policies
   - Lack of support from the school or district administration
   - No obstacles
   - We haven’t attempted organizing any SR2S activities

8. How can the Alameda County SR2S program be improved to better meet the needs of our community and better encourage active (walking, biking) and shared (carpooling, public transportation) transportation? Community can be defined as your school, neighborhood, or any another definition that you associate with the SR2S program.

The Alameda County Safe Routes to School Program is funded by the Alameda County Transportation Commission (http://www.alamedacounty.org/) Your transportation dollars at work!
Pedestrian Rodeo Teacher Survey (Elementary)

Pedestrian Rodeo Form for Teachers (Elementary)

Note to Teachers: Thank you for taking the time to complete this survey with your students. Your participation helps us improve our program. Please return forms by April 29 or earlier.

- Have students complete the Safety Quiz.
- Please fill out the questions below.
- Have students swap their answer sheet with a neighbor.
- Talk the class through the answers (see reverse).
- Record the summary of the student quiz scores below.
- Return your completed survey to the Rodeo Instructor. You do not need to return all quiz forms.

Teacher Name: ________________________________

Name of School/Event: __________________________

Date of Event: ______________ Classroom Grade: ______________

Teacher Feedback

1. How fun was the program for your students? Very fun Somewhat fun Somewhat boring Very boring

2. Did your students learn about pedestrian safety? Definitely Somewhat Not at all

3. Was the program age appropriate? Definitely Somewhat Not at all

4. What do you think could be included or improved upon?

5. Do you have other feedback to share with us?

Student Quiz Summary

1. How many students participated in the Pedestrian Rodeo Quiz? _________

2. How many scored 80% or higher? _________
Pedestrian Safety Quiz – Elementary

Thank you for taking the time to provide feedback!
Your participation helps us improve our program.
All quizzes should be returned by April 29 or earlier.

For each of the statements below, mark True or False.

<p>| | | | | | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>A pedestrian is a person who is walking or running.</td>
<td>True</td>
<td>False</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>The safest place to cross is between parked cars.</td>
<td>True</td>
<td>False</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>If you are walking in a neighborhood and there are no sidewalks, you should walk close to the side of the road facing traffic.</td>
<td>True</td>
<td>False</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>Cars will always stop for pedestrians.</td>
<td>True</td>
<td>False</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>A traffic signal is a light that tells cars and people when to stop or go.</td>
<td>True</td>
<td>False</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>This symbol: ![image of pedestrian] means that it's time to walk.</td>
<td>True</td>
<td>False</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>This symbol: ![image of hand] means that you should stop and not cross the street.</td>
<td>True</td>
<td>False</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>You should not leave the curb when the red hand is flashing.</td>
<td>True</td>
<td>False</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>When you are crossing the street, you should always try to make eye contact with the driver.</td>
<td>True</td>
<td>False</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>Always look all ways before crossing the street.</td>
<td>True</td>
<td>False</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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The Alameda County Safe Routes to School Program is funded by the Alameda County Transportation Commission (https://www.atec.org/). Your transportation dollars at work!
Pedestrian Rodeo Teacher Survey (Middle)

**Pedestrian Rodeo Form for Teachers (Middle)**

**Note to Teachers:** Thank you for taking the time to complete this survey with your students. Your participation helps us improve our program. Please return forms by April 29 or earlier.

- Have students complete the Safety Quiz.
- Please fill out the questions below.
- Have students swap their answer sheet with a neighbor.
- Talk the class through the answers (see reverse).
- Record the summary of the student quiz scores below.
- Return your completed survey to the Rodeo Instructor. You do not need to return all quiz forms.

Teacher Name: ________________________________

Name of School/Event: _____________________________

Date of Event: ___________ Classroom Grade: ___________

**Teacher Feedback**

1. **How fun was the program for your students?**
   - Very fun
   - Somewhat fun
   - Somewhat boring
   - Very boring

2. **Did your students learn about pedestrian safety?**
   - Definitely
   - Somewhat
   - Not at all

3. **Was the program age appropriate?**
   - Definitely
   - Somewhat
   - Not at all

4. **What do you think could be included or improved upon?**

5. **Do you have other feedback to share with us?**

**Student Quiz Summary**

1. **How many students participated in the Pedestrian Rodeo Quiz?** __________

2. **How many scored 80% or higher?** __________
Pedestrian Safety Quiz – Middle/High

Thank you for taking the time to provide feedback!
Your participation helps us improve our program.
All quizzes should be returned by April 29 or earlier.

For each of the statements below, mark True or False.

1. Pedestrians can increase their visibility at night by carrying a flashlight when walking and by wearing retro-reflective clothing.  
2. Whenever possible, cross the street at a designated crosswalk or intersection.  
3. It is much safer to walk on a sidewalk or path, but if a sidewalk or path is not available, walk on the shoulder and facing traffic.  
4. Higher vehicle speeds increase both the likelihood of a pedestrian being struck by a car and the severity of injury.  
5. Most pedestrian deaths occur in urban areas, non-intersection locations, and at night.  
6. Collisions have increased among pedestrians struck by a car or train while wearing headphones connected to an iPod or other handheld device.  
7. A red flashing hand means cross now.  
8. Parking lots are safe places to walk.  
9. If you’re walking on a cycling or pedestrian path, always walk on the right-hand side so that faster walkers, runners, and cyclists can easily pass.  
10. Always carry some form of identification in case of an emergency.
Pedestrian Rodeo Participant Hand-Raising Survey

Pedestrian Rodeo “Hand-Raising” Participant Survey
Thank you for participating in Safe Routes to Schools!
Please fill out this brief survey to help us improve the program.
All surveys should be returned by April 29 or earlier.

Name of School/Event ________________________________

Date _______________ Grade _______________

Number of Students Surveyed _______________

Instructors: Please ask the class the following questions
and note the approximate number of students who raise their hands.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Did you like the program?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Would you like to walk to school more?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Did you learn more about walking safely?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Walking School Bus Parent Volunteer Survey

Thank you for participating in the Walking School Bus program! Please fill out this brief survey to help us improve the program. All surveys should be returned by April 29 or earlier.

Name of School/Event ____________________________ Date ________________

1. What grade is your child in?

<table>
<thead>
<tr>
<th>What is your opinion of the Walking School Bus program?</th>
<th>Very fun</th>
<th>Somewhat fun</th>
<th>Somewhat boring</th>
<th>Very boring</th>
<th>We do not participate</th>
</tr>
</thead>
</table>

2. Do you think your child will walk more often after participating in the Walking School Bus?

| Yes | No | My child already walks every day | Not sure |

3. Do you feel like your child knows how to walk more safely after joining the Walking School Bus?

| Yes | No | My child already knew how to walk safely | Not sure |

4. How did your child get to school before joining the Walking School Bus?

- Walked
- Biked
- School Bus
- Rode in the family car
- Carpooled (with other kids not in the same household)
- Took public transit (bus, BART, etc.)

5. a. If your child walked, did they walk with an adult?

| Yes |Sometimes | No |

6. Did you volunteer for the Walking School Bus?

| Yes | No |

6. a. If yes, why?

- Walking is fun for my family
- Walking encourages an active and healthy lifestyle
- Driving causes air pollution and hurts the environment
- Reducing driving minimizes crashes and congestion near school
- I wanted to spend more time with my family

6. b. If no, why not?

| It was not convenient for me | I did not know how to get involved | I did not have time | Other (please specify): |

7. How often does your child join the Walking School Bus?

| Every day | 3-4 days per week | 1-2 days per week | Occasionally | Never |

8. How does your child usually get to school on days that they do not join the Walking School Bus?

- Walks
- Bikes
- School Bus
- Rides in the family car
- Carpools (with other kids not in the same household)
- Takes public transit (bus, BART, etc.)

9. Do you think the Walking School Bus will help your child gain the skills and confidence to eventually be able to walk to school on their own?

| Yes | No | Maybe |

10. Do you have any other suggestions to help us improve the Walking School Bus Program?
Rock the Block Teacher Survey

Rock the Block Form for Teachers

Note to Teachers: Thank you for taking the time to complete this survey with your students. Your participation helps us improve our program. Please return all forms by April 29 or earlier.

Teacher Name: ____________________________

Name of School/Event: ____________________________

Date of Event: ______________ Classroom Grade: ____________

1. How fun was Rock the Block for your students? Very fun Somewhat fun Somewhat boring Very boring

2. How informative was Rock the Block for your students? Very informative Somewhat informative Not informative

3. Did you feel that Rock the Block was age-appropriate for your students? Definitely Somewhat Not at all

4. What do you think could be included or improved upon?

5. Do you have other feedback to share with us?
Rock the Block Participant Hand-Raising Survey

Thank you for participating in Safe Routes to Schools!
Please fill out this brief survey to help us improve the program.
All surveys should be returned by April 29 or earlier.

Name of School/Event _________________________________
Date ___________ Grade ___________
Number of Students Surveyed _______________

Ask students the following questions and estimate the percentage of students who raise their hands.  Yes

1. Did you like the Rock the Block assembly?

2. Would you like to walk or bike more often after watching the Rock the Block assembly?

3. Who here wants to talk to their parents about walking and biking to school?

4. Do you feel like you know how to walk or bike more safely after watching this assembly?

Ask students: Raise your hand if you think each statement is true.
Estimate the percentage of students who raise their hands.  True

1. If I’m on a sidewalk, I don’t have to stop before crossing the street.

2. People biking must obey the same rules that people driving do.

3. People driving will always stop for a pedestrian in a crosswalk.

4. While crossing the street, I should try to make eye contact with people driving.

5. I should use my feet before my head.
Step Up Teacher Survey

Step Up to the Streets Form for Teachers

Note to Teachers: Thank you for taking the time to complete this survey with your students. Your participation helps us improve our program. Please return forms by April 29 or earlier.

- Have students complete the Step Up Quiz and please fill out the questions below.
- Have students swap their answer sheet with a neighbor.
- Talk the class through the answers (see reverse).
- Record the summary of the student quiz scores below.
- Return your completed survey to the Step Up Instructor. You do not need to return all quiz forms.

Teacher Name: __________________________

Name of School/Event: __________________________

Date of Event: ___________ Classroom Grade: ___________

1. How fun was Step Up for your students? Very fun Somewhat fun Somewhat boring Very boring

2. How informative was Step Up for your students? Very informative Somewhat informative Not informative

3. Did you feel that Step Up was age-appropriate for your students? Definitely Somewhat Not at all

4. What do you think could be included or improved upon?

5. Do you have other feedback to share with us?

Student Quiz Summary

1. How many students participated in the Step Up Quiz? __________

2. How many scored 80% or higher? __________
# Student Participant Quiz – Answer Form

Teachers: Use this guide to talk through the responses with your students.

<table>
<thead>
<tr>
<th>True</th>
<th>False</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

1. I should always cross at the crosswalk or where there is a traffic signal.  
   *If available, crosswalks and intersections are the safest places to cross because drivers are looking for you.*

2. If I’m on a sidewalk, I don’t have to stop before crossing the street.  
   *Even if you are on a sidewalk or at a crosswalk, you still need to look all directions and wait for cars to stop before you cross the street.*

3. It’s safe to wear headphones when riding my bike.  
   *Headphones make it difficult to hear what is going on around you and react to changes in your surroundings, like an oncoming vehicle.*

4. I should check my bike regularly to be sure it’s safe to ride.  
   *Check your brakes, tires, chain, and shifting on a regular basis. Ask for help if you’re not sure about how to check.*

5. People biking must obey the same rules that people driving do.  
   *In all 50 states, people on bikes are required to follow the same laws as other drivers.*

6. I should start crossing the street when the red hand is flashing.  
   *Though California law recently changed to allow people to start crossing the street when the red hand is flashing, you should still wait for the walk signal.*

7. I should look all ways before I cross the street.  
   *Looking all ways allows you to spot oncoming cars and choose a safe gap in traffic to cross the street.*

8. Cars will always stop for a pedestrian in a crosswalk.  
   *Cars will not always stop because the driver may not see you or they may choose not to stop.*

9. While crossing the street, I should try to make eye contact with drivers.  
   *Making eye contact with drivers lets you know that they see you and will wait for you to cross the street.*

10. I should use my feet before my head.  
    *You should think and act in your surroundings before using your feet to cross the street.*
Step Up to the Streets “Hand-Raising” Participant Survey

Thank you for participating in Safe Routes to Schools!
Please fill out this brief survey to help us improve the program.
All surveys should be returned by April 29 or earlier.

Name of School/Event

Date ___________ Grade ___________

Number of Students Surveyed ___________

Instructors: Please ask the class the following questions and note the approximate number of students who raise their hands.

1. Did you like the Step Up assembly? [ ] Yes [ ] No

2. Would you like to walk or bike more often after watching the Step Up assembly? [ ] Yes [ ] No

3. Are you planning to talk to your parents about walking or biking to school after watching the Step Up assembly? [ ] Yes [ ] No

4. Do you feel like you know how to walk or bike more safely after watching the Step Up assembly? [ ] Yes [ ] No

The Alameda County Safe Routes to School Program is funded by the Alameda County Transportation Commission [https://www.alamedactc.org/]. Your transportation dollars at work!
Drive Your Bike Skills Survey

Thank you for being part of the Drive Your Bike program!
All tallies should be returned by April 29 or earlier.

This assessment evaluates how well your students have learned safe bike handling skills through our program. You can evaluate the students during the on-campus portion of the program or during intersection practice.

Name of School/Event ___________________________ Date ___________________________

Please rate your students on a scale from 1-5, where 1 indicates that a student is unable to demonstrate the skill being assessed and 5 indicates perfect mastery.

<table>
<thead>
<tr>
<th>Student Name</th>
<th>Communication</th>
<th>Bike control</th>
<th>Shoulder check</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Student can use arm signals appropriately and clearly when making a turn.</td>
<td>Student can stop at a stop sign, maintain a straight line while riding, and ride predictably.</td>
<td>Student can look over left shoulder to scan for cars and hazards while maintaining a straight line.</td>
</tr>
</tbody>
</table>

1. 
2. 
3. 
4. 
5. 
6. 
7. 
8. 
9. 
10. 
11. 
12. 
13. 
14. 
15. 
16. 
17. 
18. 
19. 
20.
Drive Your Bike Participant Survey

Thank you for participating in the Drive Your Bike program! Please fill out this brief survey to help us improve the program. Please return completed surveys using the provided pre-paid envelope or email to surveys@alamedacountrys2s.org by April 29 or earlier.

Name of School/Event ______________________ Date ______________________

1. What grade are you in?

2. Did you like the Drive Your Bike program?  
   It was... 
   | Very fun | Somewhat fun | Somewhat boring | Very boring | I did not participate |
   |________|________|________|________|________________|

3. Would you like to bike more often after participating in the Drive Your Bike program?  
   Yes | No | I already bike every day | Not sure |

4. Do you feel like you know how to bike more safely after participating in the program?  
   Yes | No | I already knew how to bike safely | Not sure |

Drive Your Bike Biking Safety Quiz

For each of the statements below, mark True or False.

<table>
<thead>
<tr>
<th>True</th>
<th>False</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. You should wear a bike helmet every time you ride a bike.</td>
<td></td>
</tr>
<tr>
<td>2. You should always ride the opposite direction as the traffic.</td>
<td></td>
</tr>
<tr>
<td>3. The most important thing you can do to bike safely is to be predictable.</td>
<td></td>
</tr>
<tr>
<td>4. People biking must obey the same rules as people driving.</td>
<td></td>
</tr>
<tr>
<td>5. At an intersection, you should check both ways before riding through it.</td>
<td></td>
</tr>
<tr>
<td>6. It's safe to wear headphones when riding your bike.</td>
<td></td>
</tr>
<tr>
<td>7. You should check your bike regularly to be sure it's safe to ride.</td>
<td></td>
</tr>
<tr>
<td>8. Cars always get to go first at intersections.</td>
<td></td>
</tr>
<tr>
<td>10. If you don't have a stop sign but cross traffic does, you should stop.</td>
<td></td>
</tr>
</tbody>
</table>
Bike Rodeo Teacher Survey

Bike Rodeo Form for Teachers
Thank you for taking the time to provide feedback!
Your participation helps us improve our program.

Please return your completed survey to the front office.

Teacher Name: ________________________________

Name of School/Event: ____________________________

Date of Event: ___________ Classroom Grade: _____________

Number of Students Participating: ___________

Teacher Feedback

1. Did your students benefit from the Bike Rodeo?
   Definitely Somewhat Not at all

2. How fun was the program for your students?
   Very fun Somewhat fun Somewhat boring Very boring

3. Did your students learn about bike safety?
   Definitely Somewhat Not at all

4. Was the program age appropriate?
   Definitely Somewhat Not at all

5. What do you think could be included or improved upon?

6. Do you have other feedback to share with us?
Bike Rodeo Participant Survey

Thank you for participating in the Bike Rodeo!
Please fill out this brief survey to help us improve the program. Please return completed surveys using the provided pre-paid envelope or email to surveys@alamedacountys2s.org by April 29 or earlier.

Name of School/Event ___________________________ Date ___________________________

1. What grade are you in?

2. Did you like the Bike Rodeo? 
   
<table>
<thead>
<tr>
<th>Very fun</th>
<th>Somewhat fun</th>
<th>Somewhat boring</th>
<th>Very boring</th>
<th>I did not participate</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3. Would you like to bike more often after participating in the Bike Rodeo? 
   
<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>I already bike every day</th>
<th>Not sure</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Do you feel like you know how to bike more safely after participating in the program? 
   
<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>I already knew how to bike safely</th>
<th>Not sure</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Bike Rodeo Biking Safety Quiz

For each of the statements below, mark True or False.

1. You should wear a bike helmet every time you ride a bike. 
   True False

2. You should always ride in the opposite direction as the traffic. 
   True False

3. It’s safe to wear sandals or flip-flops when you ride a bike.
   True False

4. People biking must obey the same rules as people driving.
   True False

5. At an intersection, you should check both ways before riding through it.
   True False

6. It’s safe to wear headphones when riding your bike.
   True False

7. You should check your bike regularly to be sure it’s safe to ride.
   True False

8. Pedestrians have the right-of-way at stop signs and cross walks.
   True False

9. Kids under 18 are allowed to ride on the sidewalk.
   True False

10. If your bike has two hand brakes, you should only use the left brake when you stop.
    True False
# Bike Train Parent Volunteer Survey

Thank you for participating in the Bike Train program! Please fill out this brief survey to help us improve the program. All surveys should be returned by April 29 or earlier.

Name of School/Event ____________________________ Date ____________________________

1. What grade is your child in?  
   - [ ] Kindergarten  
   - [ ] 1st Grade  
   - [ ] 2nd Grade  
   - [ ] 3rd Grade  
   - [ ] 4th Grade  
   - [ ] 5th Grade  
   - [ ] 6th Grade  
   - [ ] 7th Grade  
   - [ ] 8th Grade  
   - [ ] 9th Grade  
   - [ ] 10th Grade  
   - [ ] 11th Grade  
   - [ ] 12th Grade  
   - [ ] Other ____________________________

2. What is your opinion of the Bike Train program?  
   - [ ] Very fun  
   - [ ] Somewhat fun  
   - [ ] Somewhat boring  
   - [ ] Very boring  
   - [ ] We do not participate  

3. Do you think your child will bike more often after participating in the Bike Train?  
   - [ ] Yes  
   - [ ] No  
   - [ ] My child already bikes every day  
   - [ ] My child already knew how to bike safely  
   - [ ] Not sure

4. Do you feel like your child knows how to bike more safely after joining the Bike Train?  
   - [ ] Yes  
   - [ ] No  
   - [ ] My child already knew how to bike safely  
   - [ ] Not sure

5. How did your child get to school before joining the Bike Train?  
   - [ ] Walked  
   - [ ] Biked  
   - [ ] School Bus  
   - [ ] Rode in the family car  
   - [ ] Carpooled (with other kids not in the same household)  
   - [ ] Took public transit (bus, BART, etc.)

   a. If your child biked, did they bike with an adult?  
   - [ ] Yes  
   - [ ] Sometimes  
   - [ ] No

6. Did you volunteer for the Bike Train?  
   - [ ] Yes  
   - [ ] No

   a. If yes, why?  
   - [ ] Walking is fun for my family  
   - [ ] Walking encourages an active and healthy lifestyle  
   - [ ] Driving causes air pollution and hurts the environment  
   - [ ] Reducing driving minimizes crashes and congestion near school  
   - [ ] I wanted to spend more time with my family

   b. If no, why not?  
   - [ ] It was not convenient for me  
   - [ ] I did not know how to get involved  
   - [ ] I did not have time  
   - [ ] Other (please specify): ____________________________

7. How often does your child join the Bike Train?  
   - [ ] Every day  
   - [ ] 3-4 days per week  
   - [ ] 1-2 days per week  
   - [ ] Occasionally  
   - [ ] Never

8. How does your child usually get to school on days that they do not join the Bike Train?  
   - [ ] Walks  
   - [ ] Bikes  
   - [ ] School Bus  
   - [ ] Rides in the family car  
   - [ ] Carpooled (with other kids not in the same household)  
   - [ ] Takes public transit (bus, BART, etc.)

9. Do you think the Bike Train will help your child gain the skills and confidence to eventually be able to bike to school on their own?  
   - [ ] Yes  
   - [ ] No  
   - [ ] Maybe

10. Do you have any other suggestions to help us improve the Bike Train Program?
# Bike Mobile Participant Survey

Thank you for participating in the BikeMobile event! Please fill out this brief survey to help us improve the program. All surveys should be returned by April 29 or earlier.

<table>
<thead>
<tr>
<th>Name of School/Event</th>
<th>Date</th>
</tr>
</thead>
</table>

## 1. What grade are you in?

<table>
<thead>
<tr>
<th>The BikeMobile is...</th>
<th>Very fun</th>
<th>Somewhat fun</th>
<th>Somewhat boring</th>
<th>Very boring</th>
<th>I did not participate</th>
</tr>
</thead>
</table>

## 2. Would you like to use your bike more often now that it’s working better?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>I already bike every day</th>
<th>Not sure</th>
</tr>
</thead>
</table>

## 3. Are you able to repair your own bike?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No one at my house can repair my bike</th>
<th>Someone at my house is able to repair my bike</th>
<th>I don’t own a bike</th>
</tr>
</thead>
</table>

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