**Section A – Taxicab driving**

**First, I’m going to ask you questions about driving a taxicab in this city.**

**1a.** What month and year did you start working as a taxicab driver?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*mm/yy*

**1b**. What month and year did you start working as a driver in this city?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*mm/yy*

**1c**. What company do you work for?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1d.** What month and year did you start working for this company?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *mm/yy*

**2a.** Do you own or lease the taxicab you drive?

Own -------1

Lease------2

**3a.** Do you own or lease the plate/medallion you use?

Own --------1

Lease-------2

**4a.** In a typical day, how many hours do you drive your taxicab during the daytime?

 \_\_\_\_\_hours daytime

**4b.** And at night? \_\_\_\_\_hours nighttime

**5.** In a typical work week, how many hours do you drive your taxicab?

\_\_\_\_\_\_ hours per week

**6**. In a typical work week, how many miles do you drive your taxi?

\_\_\_\_\_\_\_ miles per week

 **Survey Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **MM/DD/YY**

 **Airport:** \_\_ Bush/Intercontinental

\_\_ Hobby

**Other:** \_\_ Downtown

 **2b**. Are you authorized to sublease your car to another driver?

Yes ------1 No------0 N/A-------97

**2c.** Do you lease your taxicab on a long-term basis or a daily/weekly basis?

Long term ----1

Daily -----------2 Weekly---------3

N/A-------------97

**3b.** Do you lease your plate/medallion on a long-term basis or a daily/weekly basis?

Long term ----1

Daily -----------2 Weekly---------3

N/A-------------97

**6b**. In a typical work week, how much of your taxi driving is on the highway? \_\_\_\_\_\_\_ %

**7.** When you are trying to pick up fares, what percentage of time do you generally spend in the following parts of the city? *Show driver option card and make sure responses total 100%*

­­­­­­­\_\_\_\_\_\_ Airport \_\_\_\_\_ Nightclubs/bars

\_\_\_\_\_\_ Downtown \_\_\_\_\_ Tourist attractions

\_\_\_\_\_\_ Hotels \_\_\_\_\_ Recreational areas (games, concerts, restaurants)

\_\_\_\_\_\_ Conference areas \_\_\_\_\_ Inner-city neighborhoods

\_\_\_\_\_\_ Other, Specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section B – Job Demands**

**The next questions are about your job demands as a taxicab driver.**

**On a scale from 1 to 5 with 1 being “Never/Rarely” and 5 being “Very often/All the time”:**

**1.** How often does your work as a taxicab driver make you feel rushed?

(Never/Rarely)  **1 2 3 4 5 (**Very Often/ All the time)

**2.** How often do your work duties as a taxicab driver require you to work very hard?

(Never/Rarely) **1 2 3 4 5 (**Very Often/ All the time)

**3.** How often is there a great deal of work/duties to be done (as a taxicab driver)?

(Never/Rarely)  **1 2 3 4 5 (**Very Often/ All the time)

**4.** How often do your work duties as a taxicab driver leave you with little time to get things done away from your job?

(Never/Rarely)  **1 2 3 4 5 (**Very Often/ All the time)

**Section C – Passenger Violence**

**The next questions are about your contact with passengers (not another driver).**

**1a.** In the past year (12 months), have you been verbally assaulted? This includes being yelled at, threatened or insulted by a passenger?

No------0 (*Skip to Q3a*)

Yes-----1

**1b.** Over the last year, how many times have you been verbally assaulted?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1c.** How many times per day?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1d.** On average, how many times per week?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1e.** On average, how many times per month?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1f.** When was the most recent incident?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *mm/yy*

**2.** Who did you tell/report any of these incidents to?

*Driver may select more than one response.*

No one…………………..………....0

Taxicab owner/Safety director…...1

Dispatcher……………….……..….2

Another taxicab driver………...….3

Police………………………............4

Other……………………………….5

Specify:\_\_\_\_\_\_\_\_\_\_\_\_

**3a.** In the past year (12 months), have you had a passenger refuse to pay the fare (theft of service)?

No---- 0 (*Skip to Q5a, next page*)

Yes-----1

[If yes]

**3b.** Over the last year, how many times has a passenger refused to pay the fare (theft of service)?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3c.** How many times per day?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3d.** On average, how many times per week?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3e.** On average, how many times per month?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3f.** When was the most recent incident?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *mm/yy*

**4.** Who did you tell/report any of these incidents to?

*Driver may select more than one response.*

No one…………………..………....0

Taxicab owner/Safety director…...1

Dispatcher……………….….……..2

Another taxicab driver………...….3

Police………………………............4

Other……………………………….5

Specify:\_\_\_\_\_\_\_\_\_\_\_\_

**5a.** In the past year (12 months), have you been physically assaulted by a passenger? This includes being hit, pushed or grabbed.

­­

No------0 (*Skip to Q7a*)

Yes-----1

**5b.** Over the last year, how many times have you been physically assaulted by a passenger?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5c.** On average, how many times per day?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5d.** On average, how many times per week?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5e.** On average, how many times per month?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5f.** When was the most recent incident?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *mm/yy*

**6.** Who did you tell/report any of these incidents to?

*Driver may select more than one response.*

No one…………………..………….0

Taxicab owner/Safety director.…..1

Dispatcher……………………….…2

Another taxicab driver…….…...….3

Police…………………………….....4

Other………………………………..5

Specify:\_\_\_\_\_\_\_\_\_\_\_\_

**7a.** In the past year (12 months), has your taxicab been stolen?

No------0 (*Skip to Q9a, next page*)

Yes-----1

**7b.** Over the last year, how many times was your taxicab stolen?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**7c.** Were you in the taxicab when it was stolen?

No------0

Yes-----1

**7d.** When was the most recent incident?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *mm/yy*

**8.** Who did you tell/report any of these incidents to?

*Driver may select more than one response.*

No one………………………..…….0

Taxicab owner/Safety director…..1

Dispatcher……………….……...…2

Another taxicab driver………...….3

Police…………………………….....4

Other………………………...……...5

Specify:\_\_\_\_\_\_\_\_\_\_\_\_

**9a.** In the past year (12 months), have you been a victim of theft of items such as a phone, wallet, or other items not belonging to passenger?

No------0 (Skip to Q11a)

Yes-----1

**9b.** Over the last year, how many times have you been a victim of theft?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**9c.** On average, how many times per day?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**9d.** On average, how many times per week?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**9e.** On average, how many times per month?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**9f.** When was the most recent incident?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *mm/yy*

**10.** Who did you tell/report any of these incidents to?

*Driver may select more than one response.*

No one…………………..…………0

Taxicab owner/Safety director…..1

Dispatcher……………….….……..2

Another taxicab driver………...….3

Police………………………...........4

Other……………………………….5

Specify:\_\_\_\_\_\_\_\_\_\_\_\_

**11a.** In the past year (12 months), have you been a victim of armed robbery by a passenger (such as with gun, knife, or other weapon)?

No------0 (Skip to Section D, next page)

Yes-----1

**11b.** Over the last year, how many times have you been a victim of armed robbery?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**11c.** On average, how many times per day?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**11d.** On average, how many times per week?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**11e.** On average, how many times per month?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**11f.** When was the most recent incident?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *mm/yy*

**12.** Who did you tell/report any of these incidents to?

*Driver may select more than one response.*

No one…………………..…………0

Taxicab owner/Safety director…..1

Dispatcher……………….….……..2

Another taxicab driver………...….3

Police………………………...........4

Other……………………………….5

Specify:\_\_\_\_\_\_\_\_\_\_\_\_

**Section D – Crash #1**

**The next questions ask about any crashes you may have been involved in while driving your taxicab.**

**1a.** In the past year (12 months) were you involved in motor vehicle crash while driving a taxi? This includes being hit by another car, rear-ending another car, being rear-ended, hitting a parked vehicle, a cyclist, or a pedestrian.

No------0 (Skip to Section E, page 8)

Yes-----1

**1b.** In the last year, how many crashes total?

\_\_\_\_\_\_\_\_\_\_

***Now I will ask you some questions about each crash you were involved in during the past year (12 months) while driving a taxicab, beginning with the most recent.***

**For crash #1:**

**2 a.1.1** How did the crash happen?

*Prompt driver to describe and select all accurate responses.*

***The taxicab:***

struck another vehicle ………..…1

was struck by another vehicle..…2

hit an object or animal................. 3

ran off the road………………. ….4

struck a pedestrian…………….…5

struck a cyclist..… ……………….6

was speeding……………………..7

Other……………………………….8 Specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2.a.1.2** Around what time did the crash happen? *Enter a military time (*00:00-24:00)*.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2.a.1.3** What was the weather like at the time of the crash? *Read all to driver and select all that apply.*

Clear………….………….1

Cloudy………….………..2

Fog, Smog, Smoke….....3

Rain………………..……..4

Sleet, hail………..……….5

Snow……………..………6

Blowing snow…..………..7

Severe crosswinds………8

Blowing sand, soil, dirt…..9

Other……………………...10

 Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Unknown……………………..98

**2a.2.1.** How much was the estimated total property damage for the taxicab?

$\_\_\_\_\_\_\_ Write amount -or- Unknown…98

**2a.2.2** How much was the estimated total property damage for the other vehicle?

$\_\_\_\_\_\_\_ Write amount

 Unknown…..……98

 -or- N/A……97

**2a.2.3** How much were the estimated medical costs for everyone involved?

Taxicab driver: $\_\_\_\_\_\_\_ Write amount Unknown………98

N/A….…....97

**2a.3**. Was anyone, including yourself **injured**?

 \_\_\_\_\_\_\_Number of injured people -or- Unknown………98

**2a.4**. Were there any **deaths**?

 \_\_\_\_\_\_ Number of people that died -or- Unknown………98

**Section D – Crash #2**

**Please complete this section if the driver had more than one crash in the last year.**

**3.** In the past year (12 months) were you involved in a second motor vehicle crash while driving a taxi? This includes being hit by another car, rear-ending another car, being rear-ended, hitting a parked vehicle, a cyclist, or a pedestrian.

No------0 (*Skip to Section E, page 8*)

Yes-----1

***Now I will ask you some questions about each crash you were involved in during the past year (12 months) while driving a taxicab, beginning with the most recent.***

**For crash #2:**

**4a.1.1** How did the crash happen?

*Prompt driver to describe and select all accurate responses.*

***The taxicab:***

struck another vehicle ………..…1

was struck by another vehicle…..2

hit an object or animal................. 3

ran off the road………………..….4

struck a pedestrian…………….…5

struck a cyclist..… ……………….6

was speeding……………………..7

Other……………………………….8 Specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**4.a.1.2** Around what time did the crash happen? *Enter a military time (*00:00-24:00)*.*

\_\_\_\_\_\_\_\_

**4.a.1.3** What was the weather like at the time of the crash? *Read all to driver and select all that apply.*

Clear………….…………….1

Cloudy………….……….....2

Fog, Smog, Smoke….......3

Rain………………..……...4

Sleet, hail………..………..5

Snow……………..…….….6

Blowing snow…..………...7

Severe crosswinds…….…8

Blowing sand, soil, dirt…..9

Other……………………...10

 Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Unknown……………………..98

**4a.2.1.** How much was the estimated total property damage for the taxicab?

$\_\_\_\_\_\_\_ Write amount -or- Unknown…98

**4a.2.2** How much was the estimated total property damage for the other vehicle?

$\_\_\_\_\_\_\_ Write amount

 Unknown…..……98

 -or- N/A……97

**4a.2.3** How much were the estimated medical costs for everyone involved?

Taxicab driver: $\_\_\_\_\_\_\_ Write amount Unknown………98

N/A….…....97

**4a.3**. Was anyone, including yourself **injured**?

 \_\_\_\_\_\_\_Number of injured people -or- Unknown………98

**4a.4**. Were there any **deaths**?

 \_\_\_\_\_\_ Number of people that died -or- Unknown………98

**Section E – Safety equipment**

***The next questions are about safety equipment installed in your taxicab*.**

**1**. Do you have a security camera installed in your taxicab?

No………0 *Go to question 2a, next page*

Yes…….1, Since when? \_\_\_\_\_\_\_\_*mm/yy*

The next questions ask about your camera:

**1a**. Is the camera currently working properly?

No…..…0 why?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Yes……1

**1b**. When was the last time you had your camera inspected?

\_\_\_\_\_\_\_\_\_ *mm/yy*

**1c**. Has your camera ever recorded information that was needed by police?

No……..0 Unknown…….98

Yes…….1, how many times? \_\_\_\_\_\_times

**1d.** What type of incidents did the camera record and please tell me the month and year of the most recent recording?

*Driver may select more than one*. *Read each one to the driver*.

There are no incidents to record…………..0

Verbal assault……………1 \_\_\_\_\_\_\_\_ **mm / yy**

Refusal to pay fare….…..2 \_\_\_\_\_\_\_\_ **mm / yy**

Physical assault………….3\_\_\_\_\_\_\_\_ **mm / yy**

Carjacking………….……..4\_\_\_\_\_\_\_\_ **mm / yy**

Theft:…………….………..5\_\_\_\_\_\_\_\_ **mm / yy**

Armed robbery:…….…….6 \_\_\_\_\_\_\_\_ **mm / yy**

**1e.** Has your camera ever failed to provide useable images, specifically after an incident?

No…..…...0, G*o to Q1g*

Yes………1 Unknown………98

**1f.** What were the reasons?
*Driver may select more than one response.*

Camera did not record good image at night…….……………………………………....1

Camera angle could not detect view of perpetrator.…………………………………….2

Not enough data storage…………………….3 Camera was not recording…………………..4

Recording was damaged………………...…..5

Recording was erased………………..……...6

Other……………………………………………7

Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1g.** On a scale of 1 to 10, with 1 being “no safer than before” and 10 being “extremely safe” how does having a camera in your taxicab make you feel?

No safer than before

1 2 3 4 5

6 7 8 9 10 Extremely safe

**1h**. Do you have a decal in your taxicab window notifying passengers there is a camera?

No………….0 Yes…………1

**2a.** Do you currently have a **partition** in your taxi?

No………….0 *Go to Q3a*  Yes…………1, Since when? \_\_\_\_\_\_\_\_*mm/yy*

**2b.** What percent of time do you close the partition in your taxicab during the day and at night?

\_\_\_\_\_ % of time during the day \_\_\_\_\_ % of time at night

**2c.** On a scale of 1 to 10, with 1 being “no safer than before” and 10 being “extremely safe”, how does having a partition in your taxicab make you feel?

(No safer than before) 1 2 3 4 5 6 7 8 9 10 (Extremely safe)

**3a.** Do you currently have **GPS dispatch** system in your taxicab?

No………0 *Go to Q4a Y*es…………1, Since when? \_\_\_\_\_\_\_\_*mm/yy*

**3b.** In the past year (12 months), how many times did you use your automatic dispatch system to report your location when you felt unsafe?

\_\_\_\_\_\_\_ Number of times

**3c.** On a scale of 1 to 10, with 1 being “no safer than before” and 10 being “extremely safe” how does having GPS dispatch system in yourtaxicab makes you feel?

(No safer than before) 1 2 3 4 5 6 7 8 9 10 (Extremely safe)

**4a.** Do you currently have a **silent alarm** in your taxicab?

No………0 *Go to Q5a Y*es…………1, Since when? \_\_\_\_\_\_\_\_*mm/yy*

**4b.** In the past year (12 months), how many times did you activate your silent alarm when you felt unsafe?**\_\_\_\_\_\_** Number of times

**4c.** On a scale of 1 to 10, with 1 being “no safer than before” and 10 being “extremely safe,” how safe does having a silent alarm in yourtaxicab makes you feel?

(No safer than before) 1 2 3 4 5 6 7 8 9 10 (Extremely safe)

**5a.** Do you currently have a **cashless payment system** in your taxicab?

No………0 *Go to Section F, next page Y*es…………1, Since when? \_\_\_\_\_\_\_\_mm/yy

**5b.** In the past year (12 months), what percentage of payments used the cashless system? *Prompt driver to provide estimate. \_\_\_\_*\_\_\_\_\_ Percent

**5c**. On a scale of 1 to 10, 1 being “no safer than before” and 10 being “extremely safe,” how does having a cashless payment system in yourtaxicab makes you feel?

(No safer than before) 1 2 3 4 5 6 7 8 9 10 (Extremely safe)

**Section F – Safety Training and Habits**

**The next questions ask about your safety training and habits.**

**1a.** Have you received driver safety training to be a taxicab driver in this city?

 No…..0 **1b.** Would you benefit from such a training?

Yes……1 No…….0 Maybe……3 Go to Q3

Yes….1 **1c.1.**When was your most recent training? \_\_\_\_\_\_\_\_\_\_\_**mm / yy**

 **1c.2.**How long did it last? \_\_\_**\_\_\_\_\_\_\_\_\_** **hours**

**2.** On a scale of 1 to 10 with 1 being least useful and 10 being most useful, how do you rate the driver safety training for the following:

1. Useful for keeping you safe?

(Least useful) 1 2 3 4 5 6 7 8 9 10 (Most useful)

1. Helpful in describing safety measures for de-escalating violence from passenger:

(Least helpful) 1 2 3 4 5 6 7 8 9 10 (Most helpful)

1. Helpful in describing effective road safety measures to minimize events/accidents while driving:

(Least helpful) 1 2 3 4 5 6 7 8 9 10 (Most helpful)

**Please think about safety practices at the company you drive for. Please rate how much you agree with the following statement ranging from Strongly agree to Strongly Disagree.**

**3.** Taxicab drivers new to this companylearn quickly that they are expected to follow good safety practices.

Strongly agree-**1** Agree-**2** Disagree-**3** Strongly Disagree-**4**

**4.** The company I contract with tellstaxicab drivers when they do not follow good safety practices.

Strongly agree-**1** Agree-**2** Disagree-**3** Strongly Disagree-**4**

**5.** Taxicab drivers and taxicab company management work together to ensure the safest possible conditions.

Strongly agree-**1** Agree-**2** Disagree-**3** Strongly Disagree-**4**

**6.** There are no shortcuts taken when taxicab driver health and safety are at stake.

Strongly agree-**1** Agree-**2** Disagree-**3** Strongly Disagree-**4**

**7.** The health and safety of taxicab drivers is a high priority with the company’s management where I drive.

Strongly agree-**1** Agree-**2** Disagree-**3** Strongly Disagree-**4**

**8.** I feel free to report safety problems to the company where I drive.

Strongly agree-**1** Agree-**2** Disagree-**3** Strongly Disagree-**4**

**The next questions are about your driving habits as a taxicab driver.**

**On a scale from 1 to 5, with 1 being rarely/never and 5 being very often*:***

9. How often do you wear your seat belt while driving?

(Rarely/Never) 1 2 3 4 5 (Very often/all the time)

**10.** How often do you exceed the speed limit on a residential road?

(Rarely/Never) 1 2 3 4 5 (Very often/all the time)

**11.** How often do you exceed the speed limit on a highway or freeway?

(Rarely/Never) 1 2 3 4 5 (Very often/all the time)

**12.** How often do you exceed the speed limit when travelling to do pickups?

(Rarely/Never) 1 2 3 4 5 (Very often/all the time)

**13.** How often do you exceed the speed limit when travelling with a passenger?

(Rarely/Never) 1 2 3 4 5 (Very often/all the time)

**14.** How often do you not signal to change lanes when no other traffic is around?

(Rarely/Never) 1 2 3 4 5 (Very often/all the time)

**15.** How often do you perform a U-turn in a non-designated zone?

(Rarely/Never) 1 2 3 4 5 (Very often/all the time)

**16.** How often do you not come to a complete standstill at a stop sign?

(Rarely/Never) 1 2 3 4 5 (Very often/all the time)

**17.** How often do you use a handheld cell phone while driving?

(Rarely/Never) 1 2 3 4 5 (Very often/all the time)

**18.** How often do you drive while thinking about how to get to your destination?

(Rarely/Never) 1 2 3 4 5 (Very often/all the time)

**19.** How often do you drive while thinking about your next pickup or work task?

(Rarely/Never) 1 2 3 4 5 (Very often/all the time)

**20.** How often do you drive while thinking about your work-related problems/issues?

(Rarely/Never) 1 2 3 4 5 (Very often/all the time)

**21.** How often do you drive while tired?

(Rarely/Never) 1 2 3 4 5 (Very often/all the time)

**22.** How often do you have difficulty driving because of tiredness or fatigue?

(Rarely/Never) 1 2 3 4 5 (Very often/all the time)

**23.** How often do you find yourself nodding off while driving?

(Rarely/Never) 1 2 3 4 5 (Very often/all the time)

**Please think about your knowledge of safety practices when driving a taxicab and indicate if each statement is Correct by responding ‘Yes’ or ‘No’.**

**24. Y N** It is safe to argue with a client over a fare disagreement.

**25. Y N** It is safe to keep a gun in your taxi.

**26. Y N** It is safe to disarm your camera if the passengers do not know.

**27. Y N** It is safe to talk on the phone while driving if you have a hands free device.

**28. Y N** It is safe to pick up a customer from a bar after they have had too much to drink.

**29. Y N** It is safe behavior to chase a passenger if they didn’t pay.

**Section G – Demographics**

**The following questions are about you.**

**1.** In the past year (12 months) how many motor vehicle crashes have you been involved in *not related to your job as a taxicab driver*?

 \_\_\_\_\_\_ number of crashes

**2.** What is your age today? \_\_\_\_\_\_ **years**

**3.** Are you male or female?

Male……..1 Female…….2

**4.** What is your race? *Show driver race card and let driver check 1 or more responses.*

White…………..……………………..……...1

Black or African American……………..…..2

Asian…………………………………...…….3

American Indian or Alaska Native..............4

Native Hawaiian or Pacific Islander…….....5

Refused……………………………………..96

Other……………………………………..

 Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5.** Are you of Hispanic, Latino, or Spanish origin?

No………..0 Yes……….1

**6.** Were you born in the US?

No………0

Yes…….1 *Go to Q8*

**7a.** What is the name of your country of birth/origin?

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**7b.** What was your primary occupation in your home country?

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**7c.** How many years have you lived in the

U.S.?

 \_\_\_\_\_\_\_\_ **years**

**8.** What is the highest level of formal education you have completed?

Grade school……………………..…1

Secondary school……………….…..2

Some high school………………..….3

High school diploma……………...…4

Technical/trade school……….……..5

Associate’s degree……………….…6

Undergraduate degree…….............7

Graduate degree, Master level….....8

Graduate degree, Doctoral..…….…9

**9.** What is your marital status?

Married……………..…………………..1

Not married, but in a long-term relationship…………………………....2 Separated……………………..………3

Divorced………………….……………4

Widowed……………….……………...5

Single……………….………………….6

Refused……….………………………96

**10.** What religion do you practice? *Remind driver he does not have to answer this question.*

None……………….0

Buddhism……..…..1

Islam…..…………..2

Christianity…..……3

Judaism….………..4

Sikhism……..……..5

Hinduism…………..6

Other……..………..7

 Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Refused…….…….96

**The following questions are about your participation in this survey.**

1. Why did you participate in the survey?
2. Did you understand that your participation in the survey was voluntary?

No………0, Why not? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Yes…….1

**3.** Did you understand you could stop the survey at any time?

No………0, Why not? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Yes…….1

**4.** If you have any questions or concerns about the survey, do you know who you can contact?

No………0, Why not? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Yes…….1

**5.** Did you feel that you could be completely honest in your responses in this survey?

No………0, Why not? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Yes…….1