

OMB No.: 0925-0642

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1. Please rate these aspects of the shuttle service.

	Exceptional	Very Good	Satisfactory	Unsatisfactory	N/A
Your ridership experience	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Shuttle driver's operation of bus	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Shuttle driver's communication with passengers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bus cleanliness & condition	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Accuracy of posted schedule	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
On-time arrival	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Shuttle frequency	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Synchromatics Online Shuttle Tracking System	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Do you have a comment?

2. Did you submit a shuttle service complaint between April through July?

Yes

No

If YES, was the complaint fully addressed?

3. Have you used the NCI Kiosk located in the Main Lobby within the last 3 months?

Yes

No

If YES, were you able to retrieve arrival times?

4. What is your final destination to NIH Campus: Building 10, Building 31, Building 37, Building 41 and/or Other?

5. Thank you. Please provide additional comments below. If we exceed your expectations, meet your needs, or fall short in your estimation, please describe the situation.

6. If you would like personal assistance to address an issue, please provide your contact information so an OSFM staff member can assist you.