

Six-Month Follow-Up Teen Data Collection

Under the Paperwork Reduction Act, a federal agency may not conduct or sponsor, and a person is not required to respond to collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control number. The OMB Control Number for this information collection is 2127-NEW (expiration date: MM/DD/YYYY). Public reporting for this collection of information is estimated to be approximately 4 minutes per response, including the time for reviewing instructions, completing and reviewing the collection of information. All responses to this collection of information are voluntary. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Information Collection Clearance Officer, National Highway Traffic Safety Administration, 1200 New Jersey Ave. SE, Washington, DC, 20590.

[Program generates the date these data are collected.]

Please answer all of the questions below:

How many motor vehicle collisions have you been involved in, as a driver, over the past six months, including fender-benders and parking lot incidents? A motor vehicle collision involves the vehicle you are driving colliding with another vehicle, a fixed object such a tree or pole, or a cyclist or pedestrian, resulting in damage or injury.

_____ number of collisions

[If one or more collisions ask the next three questions.]

Did your most recent collision have damage over \$1,500?
Just your best estimate.

- Yes
- No
- Don't know
- No answer

In your opinion, whose fault was your most recent collision?

- All yours
- Mostly yours
- About 50/50
- Mostly someone else's
- All someone else's
- Don't know
- No answer

How many traffic tickets for moving violations have you received in the past six months? Please don't include parking tickets.

___ number of tickets

[Only ask for those with one or more tickets.]

How many of these tickets were for being in a motor vehicle collision?

___ number of tickets

[At the end of the questions and hazard awareness retention testing, thank them and ask if the address we should mail the \$10 for helping us has changed.]