

Attachment 10. Non-respondent Questionnaire

Aviation Industry Workers Safety and Health Non-Respondent Survey

Will you answer a few short questions?

Yes → continue to question 1

No → EXIT survey

Thank you for agreeing to answer a few short questions for us.

1. How long have you worked for *{pipe in company name}*?

Please enter the number of months if less than 1 year.

Years

Months

2. What is the highest level of education you have completed?

Less than high school

Attended high school; didn't graduate

GED or equivalent

High school diploma

Attended college; no degree

Associate's degree

Bachelor's degree

Graduate or Professional degree

3. Are you male or female?

- Male
- Female
- Prefer not to answer

4. How old are you?

- Years: _____
- Prefer not to answer

5. What is your race?

Please select all that apply.

- American Indian or Alaska Native
- White
- Black or African American
- Native Hawaiian or Other Pacific Islander
- Asian
- Some other race. Please specify:

- Prefer not to answer

Thank you for your help with this important survey.