

## PUBLIC TRANSPORTATION HOME SURVEY

Name \_\_\_\_\_ Date \_\_\_\_\_

**Directions:** Ask a parent or another family member the questions below about the uses of public transportation in or near your community. Write their answers in the spaces given.

Type of Transportation in Our Community	How often have you used each type of transportation?			
	Never	Daily	Weekly	Monthly

Do you think our community has a good public transportation system (buses, trains, subway, etc.)? Why or why not?

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