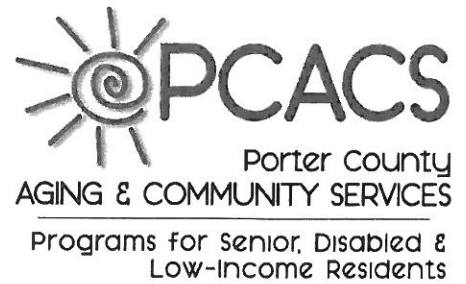


Transportation Survey



*Alternate / accessible formats available
Assistance completing this form available upon request*

Date _____

About how many times a month do you ride on one of our buses? _____

Do we pick you up on time? yes no usually

Is the bus driver friendly and helpful? yes no usually

Does the bus driver safely? yes no usually

Is the bus clean? yes no usually

Does the bus driver seem to know where he or she is going? yes no usually

When you call for an appointment is the phone answered quickly? yes no usually

When you call for an appointment is the phone answered properly? yes no usually

Have you had any transportation problems that haven't been resolved? yes no

Do you have any suggestions that could make PCACS transportation service better? _____

Have you received any exceptional service that you would like to tell us about? _____

Your name (optional) _____ phone number _____

Please contact me if you want to share some information with me or if you need assistance with this form or would like to have this form in another accessible format.

Bruce Lindner, Executive Director
(219) 465-7144 – bhindner@frontier.com

05-10-11