



Supervisor Only:

- 1. Bus Route: _____ Run: _____ Block: _____
2. Time: 6-9a 9a-1p 1-4p 4-7p After 7p
3. Day of the Week: M T W TH F Sat Sun
4. Date of trip: _____ mm/dd/yy

Chance to win \$500!

As a thank you for fully completing this survey, your name will be entered into a drawing for a chance to win one (1) \$500 Visa Cash Card.

2022 Metro Bus Customer Survey

About You

5. Would you like to be entered into the drawing for one (1) \$500 Visa Cash Card?

Your contact information will be kept confidential.

- Yes (please provide your contact information)
No

5a. First Name: _____

Email: _____

Phone: _____ Home Zip Code: _____

5b. Can we invite you to participate in occasional Metro surveys?

- Yes No

10. Do you have regular access to a car?

- Yes No

11. How often do you ride Metro Bus? Select one

- Less than once a month
1-3 days a month
1-2 days a week
3-4 days a week
5 or more days a week

12. How long have you been riding Metro Bus? Select one

- Less than 1 year
1-2 years
3-4 years
5 or more years
Today is my first time

13. Do you have a smartphone and connection to access apps when waiting at bus stops?

- Yes No

14. How did you pay your fare for this trip?

- TAP Card
TAP App on phone
Cash

15. What type of fare was it?

- 30-Day Pass
7-Day Pass
Day Pass
1 trip fare
Other: _____

16. Did you receive a discount on your fare?

- Yes No

16a. If yes, what discount?

- Student (K-12)
Student (College)
LIFE
Senior/Disabled/Medicare

Satisfaction with Metro Bus

6. To what extent do you agree or disagree with the following statements? Select one per row

Strongly Disagree Strongly Agree
I would recommend riding Metro Bus to a friend or co-worker
Metro Bus works hard to improve the experience of its riders
When I hear people criticize Metro Bus, I want to defend it
Metro Bus provides a good value for the money

7. Thinking about your experiences during your entire journey door to door and all your interactions with Metro Bus, how satisfied are you with Metro Bus? Not Satisfied at All Neutral Very Satisfied

8. Please rate your satisfaction with the following aspects of Metro Bus:

Not Satisfied at All Very Satisfied
1. How frequently buses run
2. How long it takes to get where I am going
3. Bus comes on time
4. Connecting to another bus or train
5. Availability of accurate bus arrival time info
6. Bus stop seating
7. Cleanliness of bus stop area
8. Shade at bus stop
9. Enough room on the bus
10. Comfort of bus seats (if used)
11. Cleanliness inside the bus
12. How well Metro addresses homelessness on buses
13. Safety from harassment based on my race or ethnicity
14. Safety from sexual harassment
15. Safety from crime
16. Buses and stops kept free of graffiti
17. Enforcement of Metro Bus rules
18. Courtesy of Metro bus operators
19. Wi-Fi availability and quality on the bus
20. Accurate and timely info about delays
21. Ease of fare payment
22. Availability of accurate info to plan my trips
23. Bus stop lighting (if you ride at night)
24. Transit Smartphone app
25. Metro.net website

9. Which elements listed in the shaded section do you most want Metro to improve? Write the number that corresponds to your top 3 choices. Example: if "bus comes on time" is your first choice, then write "3" in the "1st" blank space provided below.

1st 2nd 3rd

Demographics

The following information will be kept confidential and used only to confirm our survey sample is reflective of the diverse county in which we serve.

17. What is your age?

- Under 18 18 - 24 25 - 44 45 - 64 65+

18. What is your race or ethnic identification? (select all that apply)

- Latinx/Hispanic
Black/African American
White/Caucasian
Asian/Pacific Islander
Native American
Other

19. Including yourself, how many people live in your household?

- 1 2 3 4 5 6 or more

20. What languages do you speak at home? (select all that apply)

- English Spanish Chinese Tagalog
Korean Armenian
Other: _____

21. How well do you speak English?

- Very well or well
Not well or not at all

22. What is your household's total annual earnings? Select one

- Under \$15,000
\$15,000 - \$24,999
\$25,000 - \$49,999
\$50,000 - \$99,999
\$100,000+

23. What is your gender identity?

- Male Female
Non-Binary Other: _____

24. Do you have any disabilities?

- Yes No

24a. What type of disability do you have? (select all that apply)

- Low vision
Blindness
Deaf/hard-of-hearing
Mobility - use wheelchair
Mobility - do not use wheelchair
Mental or cognitive
Other: _____



Supervisor Only:

- 1. Rail Line: _____ Run: _____ Block: _____
- 2. Time: 6-9a 9a-1p 1-4p 4-7p After 7p
- 3. Day of the Week: M T W TH F Sat Sun
- 4. Date of trip: _____ mm/dd/yy

Chance to win \$500!

As a thank you for fully completing this survey, your name will be entered into a drawing for a chance to win one (1) \$500 Visa Cash Card.

2022 Metro Rail Customer Survey

About You

5. Would you like to be entered into the drawing for one (1) \$500 Visa Cash Card?

Your contact information will be kept confidential.

- Yes (please provide your contact information)
- No

5a. First Name: _____

Email: _____

Phone: _____ Home Zip Code: _____

5b. Can we invite you to participate in occasional Metro surveys?

- Yes No

10. Do you have regular access to a car?

- Yes No

11. How often do you ride Metro Rail? Select one

- Less than once a month
- 1-3 days a month
- 1-2 days a week
- 3-4 days a week
- 5 or more days a week

12. How long have you been riding Metro Rail? Select one

- Less than 1 year
- 1-2 years
- 3-4 years
- 5 or more years
- Today is my first time

13. Do you have a smartphone and connection to access apps when waiting at the station?

- Yes No

14. How did you pay your fare for this trip?

- TAP Card
- TAP App on phone
- Cash

15. What type of fare was it?

- 30-Day Pass
- 7-Day Pass
- Day Pass
- 1 trip fare
- Other: _____

16. Did you receive a discount on your fare?

- Yes No

16a. If yes, what discount?

- Student (K-12)
- Student (College)
- LIFE
- Senior/Disabled/Medicare

Satisfaction with Metro Rail

6. To what extent do you agree or disagree with the following statements?

Select one per row

- | | | | |
|---|----------------------------|----------------------------|--|
| | Strongly Disagree | | Strongly Agree |
| I would recommend riding Metro Rail to a friend or co-worker | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 |
| Metro Rail works hard to improve the experience of its riders | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 |
| When I hear people criticize Metro Rail, I want to defend it | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 |
| Metro Rail provides a good value for the money | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 |

7. Thinking about your experiences during your entire journey door to door and all your interactions with Metro Rail, how satisfied are you with Metro Rail?

- | | | |
|----------------------------|---|---|
| Not Satisfied at All | Neutral | Very Satisfied |
| <input type="checkbox"/> 1 | <input type="checkbox"/> 2 <input type="checkbox"/> 3 | <input type="checkbox"/> 4 <input type="checkbox"/> 5 |

8. Please rate your satisfaction with the following aspects of Metro Rail:

- | | | | | |
|---|--|--|---|--|
| Not Satisfied at All | Very Satisfied | | Not Satisfied at All | Very Satisfied |
| <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | 1. How frequently trains run | <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 |
| <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | 2. How long it takes to get where I am going | <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 |
| <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | 3. Train comes on time | <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 |
| <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | 4. Connecting to another train or bus | <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 |
| <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | 5. Availability of accurate train arrival time info | <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 |
| <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | 6. Train station seating | <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 |
| <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | 7. Cleanliness of train station | <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 |
| <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | 8. Enough room on the train | <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 |
| <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | 9. Comfort of train seats (if used) | <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 |
| <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | 10. Cleanliness inside the train | <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 |
| <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | 11. How well Metro addresses homelessness on trains | <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 |
| <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | 12. Safety from harassment based on my race or ethnicity | <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 |
| <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | 13. Safety from sexual harassment | <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 |
| | | | <input type="checkbox"/> N/A <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 |

14. Safety from crime

15. Trains and stations kept free of graffiti

16. Enforcement of Metro Rail rules

17. Accurate and timely info about delays

18. Cell signal quality on the train

19. Ease of fare payment

20. Availability of accurate info to plan my trips

21. Next stop info on the train

22. Transit Smartphone app

23. Metro.net website

24. Escalator reliability

25. Elevator reliability

26. Car parking

27. Bike parking

9. Which elements listed in the shaded section do you most want Metro to improve? Write the number that corresponds to your top 3 choices. Example: if "train comes on time" is your first choice, then write "3" in the "1st" blank space provided below.

1st _____ 2nd _____ 3rd _____

Demographics

The following information will be kept confidential and used only to confirm our survey sample is reflective of the diverse county in which we serve.

17. What is your age?

- Under 18 45 - 64
- 18 - 24 65+
- 25 - 44

18. What is your race or ethnic identification?

(select all that apply)

- Latinx/Hispanic
- Black/African American
- White/Caucasian
- Asian/Pacific Islander
- Native American
- Other

19. Including yourself, how many people live in your household?

- 1 2 3 4 5 6 or more

20. What languages do you speak at home?

(select all that apply)

- English Korean
- Spanish Armenian
- Chinese Other: _____
- Tagalog

21. How well do you speak English?

- Very well or well
- Not well or not at all

22. What is your household's total annual earnings? Select one

- Under \$15,000
- \$15,000 - \$24,999
- \$25,000 - \$49,999
- \$50,000 - \$99,999
- \$100,000+

23. What is your gender identity?

- Male Non-Binary
- Female Other: _____

24. Do you have any disabilities?

- Yes No

25. What type of disability do you have? (select all that apply)

- Low vision
- Blindness
- Deaf/hard-of-hearing
- Mobility - use wheelchair
- Mobility - do not use wheelchair
- Mental or cognitive
- Other: _____



Supervisor Only:

- 1. _____
- 2. Time: 6-9a 9a-1p 1-4p 4-7p After 7p
- 3. Day of the Week: M T W TH F Sat Sun
- 4. Date of trip: _____ mm/dd/yy

Chance to win \$500!

As a thank you for fully completing this survey, your name will be entered into a drawing for a chance to win one (1) \$500 Visa Cash Card.

2022 Metro Micro Customer Survey

About You

5. Would you like to be entered into the drawing for one (1) \$500 Visa Cash Card?

Your contact information will be kept confidential.

- Yes (please provide your contact information)
- No

5a. First Name: _____

Email: _____

Phone: _____ Home Zip Code: _____

5b. Can we invite you to participate in occasional Metro surveys?

- Yes
- No

10. Do you have regular access to a car?

- Yes
- No

11. How often do you ride Metro Micro? Select one

- Less than once a month
- 1-3 days a month
- 1-2 days a week
- 3-4 days a week
- 5 or more days a week
- More than once per day

12. How long have you been riding Metro Micro? Select one

- Less than 3 months
- 3-6 months
- 6-12 months
- 12+ months
- This is my first ride

13. Do you have a smartphone and connection to access apps when waiting at the pick up spot?

- Yes
- No

14. How did you pay your fare for this trip?

- TAP Card
- TAP App on phone
- Credit Card in app
- Debit Card in app
- Pass from my employer
- Pass from my university
- This trip was free

15. What type of fare was it?

- 30-Day Pass
- 7-Day Pass
- Day Pass
- 1 trip fare
- Other: _____

16. Did you receive a discount on your fare?

- Yes
- No

16a. If yes, what discount?

- Coupon Code: _____
- Ride Credit (Amount: \$ _____)

Satisfaction with Metro Micro

6. To what extent do you agree or disagree with the following statements?

Select one per row

I would recommend riding Metro Micro to a friend or co-worker

Strongly Disagree Strongly Agree

- 1 2 3 4 5

Metro Micro works hard to improve the experience of its riders

- 1 2 3 4 5

When I hear people criticize Metro Micro, I want to defend it

- 1 2 3 4 5

Metro Micro provides a good value for the money

- 1 2 3 4 5

7. Thinking about your experiences during your entire journey door to door and all your interactions with Metro Micro, how satisfied are you with Metro Micro?

Not Satisfied at All Neutral Very Satisfied

- 1 2 3 4 5

8. Please rate your satisfaction with the following aspects of Metro Micro:

Not Satisfied at All Very Satisfied

N/A 1 2 3 4 5 1. Metro Micro hours of operation

Not Satisfied at All Very Satisfied

N/A 1 2 3 4 5 13. Cleanliness inside Metro Micro

N/A 1 2 3 4 5 2. How quickly I was able to get a ride

N/A 1 2 3 4 5 14. Enforcement of Metro Micro rules

N/A 1 2 3 4 5 3. How long it takes to get where I am going

N/A 1 2 3 4 5 15. How well Metro addresses homelessness on Metro Micro

N/A 1 2 3 4 5 4. Metro Micro comes on time

N/A 1 2 3 4 5 16. Safety from harassment based on my race or ethnicity

N/A 1 2 3 4 5 5. Connecting to a bus or train

N/A 1 2 3 4 5 17. Safety from sexual harassment

N/A 1 2 3 4 5 6. Availability of accurate arrival time info

N/A 1 2 3 4 5 18. Safety from crime

N/A 1 2 3 4 5 7. Accurate and timely info about delays

N/A 1 2 3 4 5 19. Ease of fare payment

N/A 1 2 3 4 5 8. Pick up point convenience

N/A 1 2 3 4 5 20. Service zones cover where I need to go

N/A 1 2 3 4 5 9. Pick up point safety

N/A 1 2 3 4 5 21. Availability of accurate info to plan my trips

N/A 1 2 3 4 5 10. Ease of finding my pick up point

N/A 1 2 3 4 5 22. Metro.net/micro website

N/A 1 2 3 4 5 11. Enough room on Metro Micro

N/A 1 2 3 4 5 23. Metro Micro App

N/A 1 2 3 4 5 12. Comfort of Metro Micro seats

N/A 1 2 3 4 5 24. Transit Smartphone App

9. Which elements listed in the shaded section do you most want Metro to improve? Write the number that corresponds to your top 3 choices. Example: if "Micro comes on time" is your first choice, then write "4" in the "1st" blank space provided below.

1st _____ 2nd _____ 3rd _____

Demographics

The following information will be kept confidential and used only to confirm our survey sample is reflective of the diverse county in which we serve.

17. What is your age?

- Under 18
- 18 - 24
- 25 - 44
- 45 - 64
- 65+

18. What is your race or ethnic identification? (select all that apply)

- Latinx/Hispanic
- Black/African American
- White/Caucasian
- Asian/Pacific Islander
- Native American
- Other

19. Including yourself, how many people live in your household?

- 1
- 2
- 3
- 4
- 5
- 6 or more

20. What languages do you speak at home? (select all that apply)

- English
- Spanish
- Chinese
- Tagalog
- Korean
- Armenian
- Other: _____

21. How well do you speak English?

- Very well or well
- Not well or not at all

22. What is your household's total annual earnings? Select one

- Under \$15,000
- \$15,000 - \$24,999
- \$25,000 - \$49,999
- \$50,000 - \$99,999
- \$100,000+

23. What is your gender identity?

- Male
- Female
- Non-Binary
- Other: _____

24. Do you have any disabilities?

- Yes
- No

24a. What type of disability do you have? (select all that apply)

- Low vision
- Blindness
- Deaf/hard-of-hearing
- Mobility - use wheelchair
- Mobility - do not use wheelchair
- Mental or cognitive
- Other: _____