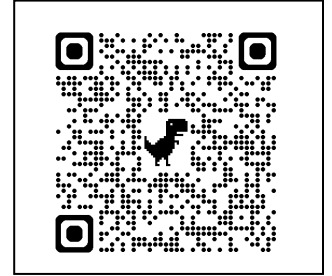




Complete our Rider Survey to enter our Raffle to Win a \$100 Gift Card!

Dear MVgo Rider,

Thank you for taking a brief moment to complete the survey below. The purpose of this survey is to improve rider experience based on passenger feedback. Please complete this survey online using the QR code, or on-board the shuttle and return in the designated drop box located next to the driver before you get off the shuttle. Or, email to info@mvgo.org. Only 1 survey per passenger will be accepted. We appreciate your participation.



1. How often do you use public transit? *(circle one)*
 - a. 5 days/week
 - b. 3-4 days/week
 - c. 1-2 days/week
 - d. Not regularly
2. How did you arrive at the Mountain View Transit Center? *(circle one)*
 - a. Caltrain
 - b. VTA Light Rail
 - c. Local Bus/Shuttle
 - d. Carpool
 - e. Uber/Lyft
 - f. Drove alone
3. How often do you ride the MVgo Shuttle? *(circle one)*
 - a. 5 days/week
 - b. 3-4 days/week
 - c. 1-2 days/week
 - d. Not regularly
4. What is the purpose of your trip? *(circle one)*
 - a. Work
 - b. Shopping/Dining/Entertainment
 - c. Visit
 - d. Other _____
5. If you use the shuttle to get to/from work, how many days per week? *(circle one)*
 - a. 5 days/week
 - b. 3-4 days/week
 - c. 1-2 days/week
 - d. Not regularly
6. If you use the shuttle to get to/from work, what is your normal start time? (ie. 9AM-5PM)

7. What factors influence your decision to use public transit? *(circle all that apply)*
 - a. Cost
 - b. Convenience
 - c. Environmental Concerns
 - d. Other _____
8. On a scale of 1-10 (10 being the highest), how satisfied are you with the availability of information regarding the MVgo schedules and routes? _____

Survey continues on next page





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9. On a scale of 1-10 (10 being the highest), how likely are you to recommend the MVgo Shuttle to others?

10. What improvements would you like to see with the MVgo Shuttle? _____
11. Which stop(s) do you use MOST often? *(list as many as two)*
1. _____
 2. _____
12. Do you use the real-time tracking system? *(circle one)* Yes No
- If yes, how do you access the information?
- a. TripShot App/Web
 - b. MVgo website
 - c. Other _____
13. What zip code do you reside in (optional)? _____
14. On a scale of 1 to 5 (5=Very Satisfied, 1=Very Dissatisfied), how satisfied are you with the MVgo Shuttle for each of the following?
- a. Hours of Operation _____
 - b. Destinations Served _____
 - c. Frequency of Service _____
 - d. On-time Performance _____
 - e. Travel Time _____
 - f. Accessibility of Information _____
 - g. Safety _____
 - h. Driver Courtesy _____
 - i. Cleanliness of Vehicles _____
 - j. Overall Service and Rider Experience _____

If you wish to be entered into our drawing for a \$100 gift card, please complete this survey no later than April 30th, 2024 and provide your name and email address below. Your contact information will only be used in the event you are selected as a winner of the drawing.

Name: _____ Email Address: _____

