



**PART B: Tell us about everyone in your household 16 years of age and older.**

Tell us about the members of your household.

 Tell us about all the trips people in your household made between **6:00 a.m. and 10:00 a.m.** on the weekday morning you received this survey. A trip is a one-way journey between two places. For example, going to the store and back is two trips; one to 'go shopping' and the other to 'return home'. Please answer the questions in Columns 5 and 6 even if you didn't travel between 6:00 a.m. and 10:00 a.m.

COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5	COLUMN 6	COLUMN 7	COLUMN 8	COLUMN 9	COLUMN 10	COLUMN 11	COLUMN 12	COLUMNS 13 AND 14		
Age	Gender	Do you have a driver's licence?	What is your employment status? <small>You may check more than one, if applicable.</small>	Day of the week <small>Check weekday for which you are reporting your trips.</small>	Did you make any trips between 6:00 a.m. and 10:00 a.m.?	Did your first trip start at home? <small>For night shift workers, the first trip might start at work. If the first trip did not start at home, please describe where it started. (e.g. address, nearest intersection, unique building name, institution, landmark or business name)</small>	What was your reason for the trip? <small>1) went to work 2) went to school 3) went shopping 4) took someone somewhere 5) returned home 6) doctor/dentist appointment 7) volunteer work 8) other (specify)</small>	What Region did you travel to? <small>1) Toronto 2) York 3) Peel 4) Durham 5) Halton 6) Hamilton 7) other (specify)</small>	Where did you go? <small>Describe in any of the following ways: • address • nearest intersection (e.g. Yonge/Bloor) • unique building name, institution or landmark (e.g. Scotia Plaza, Ryerson, Eaton Centre) • 'Home' when returning home</small>	How did you get there? <small>Choose one or more: 1) drove car 2) car passenger 3) TTC bus 4) TTC streetcar 5) TTC subway 6) GO Transit 7) bicycle 8) walked all the way 9) other (specify)</small>	What time did you start your trip? <small>Time to the nearest 5 minutes</small>	If you used public transit: <small>Choose one:</small> How did you get to the stop? <small>1) walked 2) TTC bus 3) TTC streetcar 4) car passenger 5) drove car 6) GO bus 7) other (specify)</small> How did you get from the stop to your destination? <small>Choose one: 1) walked 2) TTC bus 3) TTC streetcar 4) car passenger 5) drove car 6) GO bus 7) other (specify)</small>		
EXAMPLE	<input type="checkbox"/> 16 - 19 <input type="checkbox"/> 20 - 24 <input checked="" type="checkbox"/> 25 - 34 <input type="checkbox"/> 35 - 44 <input type="checkbox"/> 45 - 54 <input type="checkbox"/> 55 - 64 <input type="checkbox"/> 65+	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Employed full-time <input type="checkbox"/> Employed part-time <input type="checkbox"/> Full-time student <input type="checkbox"/> Part-time student <input type="checkbox"/> Not employed <input type="checkbox"/> Retired <input type="checkbox"/> Home-based employment <input type="checkbox"/> Full-time homemaker	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input checked="" type="checkbox"/> Thursday <input type="checkbox"/> Friday	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  If 'No', go to next person	<input checked="" type="checkbox"/> Started at home: <input type="checkbox"/> Started elsewhere (specify): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	First trip: <b>4</b> Then, I: <b>1</b> Then, I:	<b>1</b>	<b>St Clare Elem. School, Northcliffe/St ClairW</b>  <b>Yonge St/Bloor St</b>	<b>4</b>  <b>5</b>	<b>7:30</b>  <b>7:45</b>	<b>1</b>  <b>3</b>	<b>1</b>  <b>1</b>
	PERSON 1	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Employed full-time <input type="checkbox"/> Employed part-time <input type="checkbox"/> Full-time student <input type="checkbox"/> Part-time student <input type="checkbox"/> Not employed <input type="checkbox"/> Retired <input type="checkbox"/> Home-based employment <input type="checkbox"/> Full-time homemaker	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	<input type="checkbox"/> Yes <input type="checkbox"/> No  If 'No', go to next person	<input type="checkbox"/> Started at home: <input type="checkbox"/> Started elsewhere (specify): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	First trip: Then, I: Then, I:						
	PERSON 2	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Employed full-time <input type="checkbox"/> Employed part-time <input type="checkbox"/> Full-time student <input type="checkbox"/> Part-time student <input type="checkbox"/> Not employed <input type="checkbox"/> Retired <input type="checkbox"/> Home-based employment <input type="checkbox"/> Full-time homemaker	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	<input type="checkbox"/> Yes <input type="checkbox"/> No  If 'No', go to next person	<input type="checkbox"/> Started at home: <input type="checkbox"/> Started elsewhere (specify): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	First trip: Then, I: Then, I:						
PERSON 3	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Employed full-time <input type="checkbox"/> Employed part-time <input type="checkbox"/> Full-time student <input type="checkbox"/> Part-time student <input type="checkbox"/> Not employed <input type="checkbox"/> Retired <input type="checkbox"/> Home-based employment <input type="checkbox"/> Full-time homemaker	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	<input type="checkbox"/> Yes <input type="checkbox"/> No  If 'No', go to next person	<input type="checkbox"/> Started at home: <input type="checkbox"/> Started elsewhere (specify): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	First trip: Then, I: Then, I:							
PERSON 4	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Employed full-time <input type="checkbox"/> Employed part-time <input type="checkbox"/> Full-time student <input type="checkbox"/> Part-time student <input type="checkbox"/> Not employed <input type="checkbox"/> Retired <input type="checkbox"/> Home-based employment <input type="checkbox"/> Full-time homemaker	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	<input type="checkbox"/> Yes <input type="checkbox"/> No  If 'No', go to next person	<input type="checkbox"/> Started at home: <input type="checkbox"/> Started elsewhere (specify): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	First trip: Then, I: Then, I:							