

APPENDIX G

Employer Survey Instrument

Central Minnesota Employer Survey

Introduction

The Minnesota Department of Transportation is sponsoring a project to evaluate the potential for new regional public transportation services and other commuter options in central Minnesota.

This survey of employers is a very important component of this study. Based on responses from employers like you, project planners can better assess the public transportation needs in the region and identify whether it is cost-effective and feasible to address the needs.

This survey has about 15 major questions and should take approximately 5-10 minutes to complete. There is also one request for additional information, listed at the end of the survey. Thank you for your time.

Please complete this survey no later than November 23, 2011.

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Information about your company/organization.

Name of your company/organization

Your name

Position/role

Phone

Email

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Employer Information

Please provide the address (or addresses) of your company's/organization's work locations in Central Minnesota (the following Counties: Benton, Cass, Crow Wing, Isanti, Kanabec, Mille Lacs, Morrison, Sherburne, Stearns, Todd, Wadena, and Wright) and the approximate number of employees at each location. *If you have more than four locations, please enter the information for four locations here and see the bottom of this page to provide information on the other locations.*

Primary Location:

Address:

City/Town:

ZIP:

Secondary Location #1 (If applicable)

Address:

City/Town:

ZIP:

Secondary Location #2 (If applicable)

Address:

City/Town:

ZIP:

Secondary Location #3 (If applicable)

Address:

City/Town:

ZIP:

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Number of Employees at Primary Location

Regular Full Time	<input type="text"/>
Regular Part Time	<input type="text"/>
Additional Contract/Seasonal	<input type="text"/>

Number of Employees at Secondary Location #1

Regular Full Time	<input type="text"/>
Regular Part Time	<input type="text"/>
Additional Contract/Seasonal	<input type="text"/>

Number of Employees at Secondary Location #2

Regular Full Time	<input type="text"/>
Regular Part Time	<input type="text"/>
Additional Contract/Seasonal	<input type="text"/>

Number of Employees at Secondary Location #3

Regular Full Time	<input type="text"/>
Regular Part Time	<input type="text"/>
Additional Contract/Seasonal	<input type="text"/>

Do your employees primarily work onsite at these locations, or do they work offsite/elsewhere throughout the region? (i.e., housecalls, deliveries, etc.). Please enter the percentage that work onsite versus offsite (should total to 100).

____ % of employees work onsite	<input type="text"/>
____ % of employees work offsite	<input type="text"/>

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If you indicated you have seasonal employees above, please check during which months you typically have additional staffing:

January

May

September

February

June

October

March

July

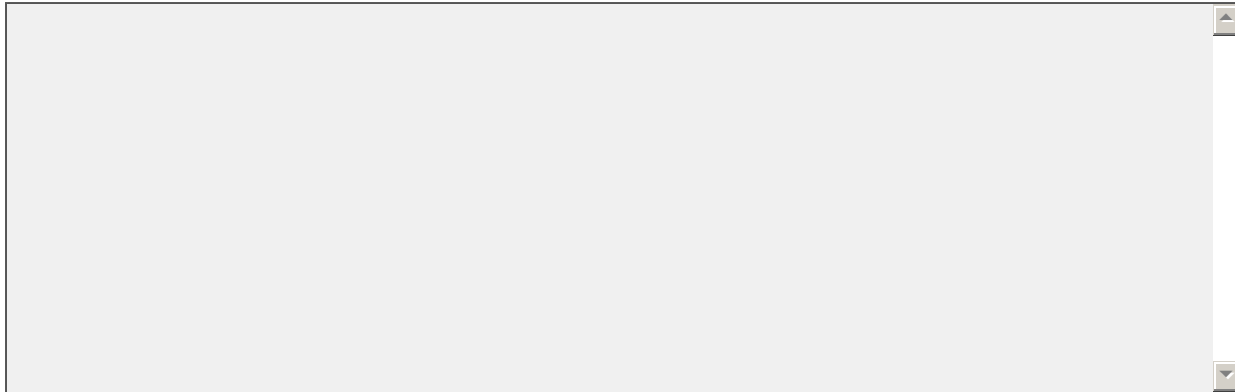
November

April

August

December

If your company/organization has more than 4 locations in the 12-county region, please provide additional information about the other sites:



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Do you provide parking for your employees?

- No
- Yes

If YES: Is there a charge for employee parking (at any of your locations)?

- No
- Yes: How much are employees charged?

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Commuter benefits and programs

There are many benefits or services that may encourage employees not to drive alone to work. We are interested in whether you currently offer, or would consider offering, any of the following commute services:

(If you work for a multi-site company/organization, please answer in terms of the PRIMARY Central Minnesota site or policies that apply for all sites)

Information/Assistance

	YES, we currently offer this	NO, we do not currently offer this but would consider it	NO, we do not currently offer this and would not be interested in offering this
Employer assistance in forming carpools and vanpools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Information about commuter options (e.g., provide bus schedules, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A commute/ transportation information office or staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Events to promote use of alternatives to driving alone (e.g., transportation fairs, bike to work day, contests, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employer newsletter or website that provides information about commute alternatives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Special Programs or Services

	YES, we currently offer this	NO, we do not currently offer this but would consider it	NO, we do not currently offer this and would not be interested in offering this
A commuter or daytime shuttle to/from the employment site	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexible work hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The ability to telecommute (work from home)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compressed work schedule (e.g., 4-10, 9-80, 3-36)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Incentives

	YES, we currently offer this	NO, we do not currently offer this but would consider it	NO, we do not currently offer this and would not be interested in offering this
Guaranteed/Emergency ride home program (offers employees who did not drive alone a taxi ride home in case of an emergency)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preferential parking for carpools/vanpools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Financial incentives for bicycling, transit, walking, carpooling, telecommuting, vanpooling, (e.g., subsidies; bonuses; random financial rewards, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation allowance (employer helps offset transportation costs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pre-tax set-aside to pay for transit or vanpool costs (also known as Commuter Choice)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other incentives to encourage people not to drive alone (e.g., prize drawings)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Are there any other programs, not listed above, you have considered offering or would consider offering? If so, please explain.

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Would you like someone to contact you about potentially establishing one or more of the programs listed on the previous page or to meet with employees to provide commuter information?

- No
- Yes

Would you or someone on your staff be interested in attending an employer focus group to discuss potential commuter services in the region?

- No
- Yes

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Does your company/organization have plans for expansion or contraction in the next couple of years (new facilities, new employees, a workforce reduction)?

- No
- Yes. Please explain:

Are you aware of any employee-related issues/concerns/needs about commutes that might be helpful for us to know as we move forward in this study? We are also interested in whether you have specific transportation workforce issues/needs for seniors, people with disabilities, immigrants/refugees, etc.

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Please email the file to jgoldman@nelsonnygaard.com. You may also call Joey Goldman at 415-284-1544 with any questions.