**How Children Travel - Questionnaire**

Age: …...

Gender:

School (full name please) ….............…….

**In term time:**

1. How long does it take you to get to school?

 …………………………………………..

1. How do you travel to school? (please circle) By:

Car Bus Walk Cycle Other ……………………….

1. (optional) If you know, how far away is your house from school?

………………………………

**In the last holiday:**

1. What was the furthest place away from home you went in a day?

 ……………..

1. How did you get there? (please circle one) By:

Car Bus Train Walk Cycle Other (please specify): ……………........

1. (optional) If you know, how far did you travel?

………………………………

1. Did you have any illnesses when you went there? If yes, please specify:

……………………………………

1. Did you visit anybody while you were there? Yes No
2. What was the furthest place away from home you went (for more than a day)?

…………………………………………..

1. How did you get there? (please circle one) By:

Car Bus Train Walk Cycle Other (please specify): ………………........

1. How long were you there for? (Please circle one)

A weekend Under a week A week 10 days 2 weeks More than 2 weeks

1. (optional) If you know, how far did you travel?

………………………………

1. Did you have any illnesses when you went there, or did you develop any illnesses while you were there? If yes, please specify:

…………………………………………………………….

1. How often did you come into contact with people (other than those who you had come with)? (Please circle one)

Every day every 2 or 3 days once a week less than once a week not at all