Maldon Neighbourhood Centre

Better Community Buses passenger evaluation form

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Thank you for travelling on the new Community Bus Service. Please take a moment to complete the quick survey below regarding your experience.

|  |
| --- |
| Date: |

Please tick the appropriate column

|  |  |  |  |
| --- | --- | --- | --- |
| Issue | Satisfied | Neutral | Dissatisfied |
| Bus schedule (when) |  |  |  |
| Bus route (where) |  |  |  |
| Passenger comfort |  |  |  |
| Passenger safety |  |  |  |
| Cost of service |  |  |  |
| Other (please specify) |  |  |  |

|  |
| --- |
| How did you hear about the service? NewspaperNewsletterRadioFlyerInternetOther (please specify) |

|  |
| --- |
| Comments:  |

|  |
| --- |
| **[Delete this section when transferring to your Microsoft Word template]**  |
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