

Our Driverless Future Forum

Participant PRE Survey

Participant ID: _____

Please check the email you received containing the link to this survey for your ID

Please answer the following questions by selecting *one* response that best represents your personal opinion. All responses will be treated confidentially.

I DEMOGRAPHIC INFORMATION

1. What is your ethnicity?
 - ☐ White, not Hispanic
 - ☐ Black, not Hispanic
 - ☐ Asian
 - ☐ Hispanic or Latino
 - ☐ Native American
 - ☐ Mixed race
 - ☐ Other (please specify):
2. What is your household income per year?
 - ☐ Less than \$25,000
 - ☐ \$25,000 - \$49,000
 - ☐ \$50,000 - \$99,999
 - ☐ Greater than \$100,000

II MOTIVATION TO PARTICIPATE

What are your reasons for participating in the Our Driverless Future Forum? Please rate the importance of the motives below.

	Strongly Disagree			Neither disagree or agree			Strongly Agree
1. To learn about the subject of Driverless Mobility.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. There is no specific reason why I chose to participate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. To influence decision making about Driverless Mobility.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. To learn more about what can be done about transportation issues.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. To have a discussion with other people, regardless of the topic.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. To hear alternative perspectives to my personal opinion on Driverless Mobility.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

III INTEREST AND KNOWLEDGE

How would you assess your personal interest and knowledge regarding driverless mobility?

Strongly Disagree	Neither disagree or agree	Strongly Agree
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- [illegible]

IV DRIVERLESS MOBILITY

Please assess the following statements about Driverless Mobility.

- | | Strongly Disagree | Disagree | Neutral | Agree | Strongly Agree |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. I think that driverless vehicles will replace human-driven vehicles in the future. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. I believe that most car crashes are caused by human error. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. I believe that human-driven vehicles are currently safer than driverless vehicles. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. I would ride in a driverless vehicle. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. I don't trust driverless vehicles. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Automation of tasks currently performed by humans is a concern for me. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. As a driver, I would feel safe sharing the road with a driverless vehicle. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. As a pedestrian or cyclist, I would feel safe sharing the road with a driverless vehicle. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. I believe driverless vehicles should be restricted to their own lanes. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. I believe a human attendant should be present in all types (freight, buses, taxis, etc.) of driverless vehicles. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. I believe driverless vehicles should be accessible to everyone, regardless of income level. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Owning a vehicle is important to me. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. I am willing to share a driverless vehicle with people I don't know. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Driverless vehicles will cause more problems than they will solve. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

- [illegible]

V PUBLIC PARTICIPATION IN DECISION MAKING

Please assess the following statements about participation in the decision making procedures in your country.

- [illegible]

VI EXPECTATIONS

Please assess the following statements about participation in the decision making procedures in your country.

- [illegible]

VII POLITICAL ORIENTATION

1. Please indicate your basic political orientation.

Left

☐☐☐☐☐☐

Right

☐

2. When it comes to politics, do you identify as a Republican, a Democrat, or something else? Please pick a point on the following scale that best represents you.

☐

Strong
Republican

☐

Not-So-Strong
Republican

☐

Independent
(Lean towards
Republicans)

☐

Independent

☐

Independent
(Lean towards
Democrats)

☐

Not-So-Strong
Democrat

☐

Strong
Democrat

3. In terms of economic issues, would you say you are:

☐

Very Liberal

☐

Liberal

☐

Moderate Liberal

☐

Moderate

☐

Moderate
Conservative

☐

Conservative

☐

Very

Conservative

4. In terms of social issues, would you say you are:

☐

Very Liberal

☐

Liberal

☐

Moderate Liberal

☐

Moderate

☐

Moderate
Conservative

☐

Conservative

☐

Very

Conservative

THANK YOU VERY MUCH for your time and support!