

Travel Survey
MON DD, YYYY

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Greetings past, present and future _____ Travelers!

As you may have read, part of my new responsibilities as Senior Director of Alumni & Parent Relations is to take our travel program to new levels. That will begin to happen with your response to this initial electronic survey. Please take a few minutes now and let me know your preferences regarding our future travel plans. Thanks!

- 1) Have you traveled with a _____ group before? Y N

- 2) In what decade did you attend _____? 1940s 1950s 1960s 1970s 1980s

- 3) Are you interested in participating in a _____-sponsored travel group in the future? Y N
(If No, you are finished. Thank you for your participation in this survey.)

- 4) What types of travel interest you? Mark all that apply.

<input type="checkbox"/> Domestic	<input type="checkbox"/> Land based trips
<input type="checkbox"/> International	<input type="checkbox"/> Cruises
<input type="checkbox"/> Day trips	<input type="checkbox"/> 7-9 days in one location
<input type="checkbox"/> 1-3 day trips	<input type="checkbox"/> Educational
<input type="checkbox"/> 4-7 day trips	<input type="checkbox"/> Cultural
<input type="checkbox"/> 8-14 day trips	<input type="checkbox"/> 2-3 week trips
<input type="checkbox"/> Recreational	

- 5) What time of year do you prefer to travel? Mark all that apply.
 Spring Summer Fall Winter

- 6) In the next three years, what locations would you be interested in visiting with a _____ group? Check as many as apply.

Cruises:

- South America
- South Pacific/Australia
- Asia
- Scandinavia/Baltic Sea
- Greek Isles/Black Sea
- Mediterranean
- Panama Canal/Caribbean
- Canada/New England
- Alaska
- European Rivers
- Hawaii/Tahiti

Other _____

Land:

- China
- Europe
- Scandinavia
- Russia
- Holy Land
- Africa
- South Africa
- New Zealand-Australia
- SE Asia/Thailand
- South America
- Canada
- U. S. A.

Other _____

- 7) Please rate your preference for comfort and quality while traveling, with 5 being the highest level and 1 being the lowest.

5 4 3 2 1

- 8) Additional comments or questions:

- 9) Your name (optional) _____

Add my name to the travel mailing list Yes No

Thank you for participating in this brief survey. Your input will help guide our program!

Senior Director
Alumni & Parent Relations