


**Special Education Expenditure Project (SEEP)
District Questionnaire**

Contact information	
<i>Please complete the required information before returning this questionnaire</i>	
School (required)	_____
District (required)	_____
State (required)	_____
Respondent Name (optional)	_____
Phone (optional)	_____
Email (optional)	_____

District Questionnaire, Part IV Transportation Programs in your District

 Once completed, please return this questionnaire to the designated SEEP study coordinator for your district.

Thank you for your participation!

INFORMATION ABOUT REPORTING BURDEN

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1820-0629. The time required to complete this information collection is estimated to average 30 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, D.C. 20202-2731. If you have comments or concerns regarding your individual submission of this form, write directly to: Scott Brown, Office of Special Education Programs, U.S. Department of Education, 400 Maryland Ave., SW, Washington, D.C. 20202.

OMB Number 1820-0629 Expiration Date: 02/28/2003



AMERICAN INSTITUTES FOR RESEARCH

Unless otherwise specified, all questions below pertain to the 1998-99 school year.

1. **Total transportation expenditures: home-to-school or school-to-school.** How much did your district spend in the 1998-99 school year on all home-to-school or school-to-school transportation services **excluding** those for athletic or other special events? (This number should include transportation for general education and special education students combined. **Exclude** any capital costs or debt service associated with the purchase or modification of school buses.)

a. Total transportation expenditures for 1998-99 school year

\$ _____

b. What is your projected budget for the 1999-2000 school year?

\$ _____

2. How many students in total were transported on an average day during the 1998-99 school year?

_____ Total students transported

3. How many of these students were transported to:

**Number of Students
(IF NONE, ENTER "0")**

Preschools	_____
Elementary schools	_____
Middle/Jr. High schools	_____
High schools	_____
Special education schools	_____
Other schools	_____

4. How many of the students reported in item 3 above were transported to schools outside of their neighborhood attendance area (e.g., magnet schools, schools of choice, or other special programs)?

Students transported outside their neighborhood attendance areas: _____ OR Don't Know

5. Did your district contract for any of its school transportation services with a private contractor during the 1998-99 school year?

Yes → GO TO ITEM A

No → SKIP TO ITEM 6

A. **If yes**, approximately how many students were transported by the private contractor?

_____ Students

6. How many total miles did all of your buses travel during the 1998-99 school year?

Total miles traveled: _____ OR Don't Know

7. How many square miles of land area does your district cover?

Square miles of land area: _____ OR Don't Know

8. What hourly wage rates did you pay bus drivers and mechanics in your district during the 1998-99 and 1999-2000 school years?

Wage rate	Bus drivers		Mechanics	
	1998-1999	1999-2000	1998-1999	1999-2000
Hourly starting wage:	\$ _____	\$ _____	\$ _____	\$ _____
Average hourly wage:	\$ _____	\$ _____	\$ _____	\$ _____
Maximum hourly wage:	\$ _____	\$ _____	\$ _____	\$ _____

9. How much did you pay per gallon for bus fuel on average during the 1998-1999 school year, and what is the current price?

Fuel type	1998-1999 average price	Current price
Gasoline	\$ _____ per gallon	\$ _____ per gallon
Diesel fuel	\$ _____ per gallon	\$ _____ per gallon

10. **Special education home-to-school and school-to-school transportation (IDEA Part B students only).** Of the total expenditures reported in item 1 above, how much did your district spend in the 1998-99 school year for all home-to-school or school-to-school transportation services for special education students? This should **include** those expenditures required to support transportation for home-to-school or school-to-school transportation services specifically designed for, and provided to, special education students **only**.

a. Total special education transportation expenditures for the 1998-99 school year: \$ _____ OR Don't Know

b. Projected special education transportation budget for the 1999-2000 school year: \$ _____

11. How many special education students were transported home-to-school or school-to-school on an average day during 1998-99?

_____ Students transported

12. How many of these special education students were transported to each of the following categories of schools?

General education schools outside their neighborhood school attendance area: _____ OR Don't Know

Special education schools: _____ OR Don't Know

13. Do you keep records that indicate how much your district spent during the 1998-99 school year for transporting special education students to general education schools outside of their neighborhood school attendance area (i.e., all home-to-school or school-to-school transportation services for special education students)?

Yes → GO TO ITEM A
No → SKIP TO ITEM 14

A. If **yes**, approximately how much did you spend for this purpose?

\$ _____ Spent on transporting students outside their neighborhood

14. **Modifications of general education buses to meet Americans with Disabilities Act (ADA) standards and requirements.** How much did your district spend to make any necessary modifications to existing vehicles owned by the district to transport students with disabilities? Record a zero if none was spent, or check the box if you do not know.

\$ _____ spent on modifications OR Don't Know

15. **Special education aides on GENERAL EDUCATION buses to assist students with disabilities.** How much did your district spend on the salaries and benefits of aides who rode **general education** buses specifically for the purpose of assisting the needs of students with disabilities? Record a zero if none was spent, or check the box if you do not know.

\$ _____ OR Don't Know

16. **Special education aides on SPECIAL EDUCATION buses to assist students with disabilities.** How much did your district spend on the salaries and benefits of aides who rode **special education** buses specifically for the purpose of addressing the needs of students with disabilities? Record a zero if none was spent, or check the box if you do not know.

\$ _____ OR Don't Know

17. What is the average hourly wage rate you pay for aides who ride the buses?

\$ _____ per hour for aides

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Thank you for your participation!

IDENTIFICATION

All responses provided for this study are kept confidential; however, sometimes we need to follow up to clarify a response. To help us make this contact, we request that you please fill in the information below. We probably will not need the information but would appreciate having it, just in case. Once the survey data are all entered, we will delete all identifying information from our files.

Respondent Name: _____

Phone: (_____) _____ - _____ ext. _____

Best Day and Times to Reach You

Days: M T W Th F between _____ : _____ AM or PM (circle) and _____ : _____ AM or PM (circle)