

Student Hand Tally Form

School District Name: _____ School Name: _____
 Teacher Name: _____ Grade: _____
 Date: _____ Number of Students Enrolled in Class: _____

1. Please note the weather.
2. Read all choices aloud before asking students to raise their hands. Please ask your students how they arrived at school yesterday and how they got home yesterday. Then please ask your students how they arrived at school today and how they plan to get home.
3. Check to confirm that the total for each row matches the total number of students enrolled.

	Weather S= Sunny R= Rainy O= Overcast F= Frost	Walk	Bike	School Bus	Family Vehicle	Carpool (with children from outside their household)	Public Transit (bus, light rail, etc.)	Other (skateboard, scooter, etc.)	# Absent	Total
Yesterday AM										
Yesterday PM										
Today AM										
Today PM										

List any disruptions, scheduled activities, or unusual travel conditions before or after school that may impact these counts.

Please complete survey and return to your school's front office by **[DATE]**.

Thanks for your participation!