

FOOD TRUCK VENDOR QUESTIONNAIRE

Number:	Year:
Food Truck:	
Owner:	
Email/Phone:	

1. Gender
<input type="checkbox"/> Male <input type="checkbox"/> Female
2. Color
<input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Yellow <input type="checkbox"/> Red
3. Nationality
<input type="checkbox"/> Brazilian <input type="checkbox"/> Other
4. Age
<input type="checkbox"/> ≤20 <input type="checkbox"/> 21-30 <input type="checkbox"/> 31-40 <input type="checkbox"/> >40
5. Marital Status
<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed
6. Children
<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> ≥5
7. Level of Education
<input type="checkbox"/> Primary (Elementary School) <input type="checkbox"/> Secondary (High School) <input type="checkbox"/> Tertiary (Graduation) <input type="checkbox"/> Quaternary (Post-graduation)
8. Reason to start a food truck business
<input type="checkbox"/> Unemployment <input type="checkbox"/> Opportunity of starting my own business <input type="checkbox"/> Feeling connected to the food truck business <input type="checkbox"/> Food truck is my side job

<input type="checkbox"/> Formal markets are saturated <input type="checkbox"/> Other
9. Number of meals sold (per day)
<input type="checkbox"/> ≤50 <input type="checkbox"/> 50-100 <input type="checkbox"/> 100-150 <input type="checkbox"/> >150
10. Monthly income (R\$; minimum wage)
<input type="checkbox"/> 1-4 <input type="checkbox"/> 5-9 <input type="checkbox"/> 10-14 <input type="checkbox"/> 15-19 <input type="checkbox"/> 20-24 <input type="checkbox"/> >24
11. Investment in the food truck (R\$)
<input type="checkbox"/> Rental <input type="checkbox"/> 10k-30k <input type="checkbox"/> 30k-50k <input type="checkbox"/> 50k-70k <input type="checkbox"/> 70k-90k <input type="checkbox"/> >90k
12. Previous experience in food services
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify your previous experience in the foodservice business: _____
13. Training in food safety/food hygiene
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, have you received training in the last 6 months? <input type="checkbox"/> Yes <input type="checkbox"/> No
14. Employee(s) in the food truck
<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> >5
15. Employee(s) in the commissary kitchen
<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> >5

16. Recruitment and hiring process
<p>() Previous experience in food trucks () Previous experience in the foodservice business () Family member () Employee referral () Other</p>
17. Certified person in charge for the food handling practices
<p>() Yes () No If yes, please specify: _____</p>
18. Best Practices and Standard Operating Procedures Manual
<p>() Yes () No () Under implementation</p>
19. Licensed food truck
<p>() Yes () No () Under implementation</p>