

11. If it was NOT a connecting flight, what mode of transport did you use to arrive at THIS airport?

Private/Company Car ☒ Bus/Shuttle ☐ Taxi/Limo ☐
Rail/Subway ☐ Rental Car ☐ Other ☐

12. How long before the scheduled departure time of your flight did you arrive at THIS airport?

Less than 30 mins ☐ 30-45 mins ☐ 45-60 mins ☐ 1 hr-1 hr 15 mins ☒
1 hr 15 mins-1 hr 30 mins ☐ 1 hr 30 mins-2 hrs ☐ More than 2 hrs ☐

13. When you checked in at THIS airport, did you use a: (check all that apply)

Self-service kiosk ☐ Check-in desk ☐ Internet check-in ☐
Mobile check-in ☒ Bag drop-off desk ☐ Other ☐

14. What is your nationality/country of citizenship?

ITALIAN

15. What is your country of residence? (if different from above)

16. Postal/Zip Code (residence):

00040

17. Are you...

Male ☒

Female ☐

18. What is your age group?

16-21 ☐ 22-25 ☐ 26-34 ☐ 35-44 ☒
45-54 ☐ 55-64 ☐ 65-75 ☐ 76 & over ☐

Additional comments:

Thank you for your participation. Please return this form to the interviewer before boarding.

Interviewer: Please indicate in the boxes below the traffic, the terminal and the gate of the interview. (Please write in block capitals or place a 'X' in the box where applicable)

124 184010092 ☒ Inter. ☐ CA-US-T ☐ Dom. ☐ 2A ☐ A15 ☐ 1

Code Questionnaire No.

Terminal

Gate No.

Interviewer No.



Dear Passenger,

As part of this airport's ongoing efforts to offer the highest service quality and improve passenger experience, we kindly ask that you take some time to fill out this brief questionnaire.

This survey is conducted by ACI (Airports Council International) and is intended to help airports understand how passengers like you evaluate their performance.

Once completed, please return this questionnaire to the interviewer before your departure. Your views regarding your airport experience today are very important to us.

Thank you.

Write in your response or place a 'X' in the box where applicable

1. Airline

RYANAIR

Airport

BUD

Flight number

FR

8417

Gate No.

15

Letters

Numbers

Departure date

12

11

2018

MM

MM

Departure time

06

20

HH

MM

(24 hours e.g. 20:15)

2. Have you just made a connection/transfer at THIS airport? Yes ☐ No ☒

3. Which airport are you flying to on the flight that you are about to board?

ROMA CIAMPINO

CIA

4. What is/was your MAIN reason for this air trip?

Business ☐

Leisure ☒

Other ☐

5. Which section of the aircraft are you travelling in?

First Class ☐

Business/Upper Class ☐

Economy/Tourist ☒

6. Including this trip, how many return trips by air have you made to any destination in the past 12 months? (A departing and arriving flight counts as one trip.)

1-2 ☐

3-5 ☐

6-10 ☐

11-20 ☐

21 or more ☒

11. If it was NOT a connecting flight, what mode of transport did you use to arrive at THIS airport?

Private/Company Car ☐ Bus/Shuttle ☒ Taxi/Limo ☒
Rail/Subway ☐ Rental Car ☐ Other ☐

12. How long before the scheduled departure time of your flight did you arrive at THIS airport?

Less than 30 mins ☐ 30-45 mins ☐ 45-60 mins ☐ 1 hr-1 hr 15 mins ☐
1 hr 15 mins-1 hr 30 mins ☒ 1 hr 30 mins-2 hrs ☐ More than 2 hrs ☐

13. When you checked in at THIS airport, did you use a: (check all that apply)

Self-service kiosk ☐ Check-in desk ☐ Internet check-in ☐
Mobile check-in ☐ Bag drop-off desk ☒ Other ☐

14. What is your nationality/country of citizenship?

NETHERLANDS

15. What is your country of residence? (if different from above)

HUNGARY

16. Postal/Zip Code (residence):

1 0 2 6

17. Are you...

Male ☒

Female ☐

18. What is your age group?

16-21 ☐ 22-25 ☐ 26-34 ☐ 35-44 ☐
45-54 ☒ 55-64 ☐ 65-75 ☐ 76 & over ☐

Additional comments:

Thank you for your participation. Please return this form to the interviewer before boarding.

Interviewer: Please indicate in the boxes below the traffic, the terminal and the gate of the interview. (Please write in block capitals or place a 'X' in the box where applicable)

124 184010129 Inter. ☒ CA-US-T ☐ Dom. ☐ 2A A15 1

Code Questionnaire No. Terminal Gate No. Interviewer No.



Dear Passenger,

As part of this airport's ongoing efforts to offer the highest service quality and improve passenger experience, we kindly ask that you take some time to fill out this brief questionnaire.

This survey is conducted by ACI (Airports Council International) and is intended to help airports understand how passengers like you evaluate their performance.

Once completed, please return this questionnaire to the interviewer before your departure. Your views regarding your airport experience today are very important to us.

Thank you.

Write in your response or place a 'X' in the box where applicable

1. Airline

EASYJET RYANAIR

Airport

BUD

Flight number

FR

8417

Gate No.

15A

Letters

Numbers

Departure date

1 2

1 1

2018

MM

HH

Departure time

0 6

2 0

MM

(24 hours e.g. 20:15)

2. Have you just made a connection/transfer at THIS airport?

Yes ☐

No ☒

3. Which airport are you flying to on the flight that you are about to board?

CIA

RODE

CIA

4. What is/was your MAIN reason for this air trip?

Business ☒

Letsure ☐

Other ☐

5. Which section of the aircraft are you travelling in?

First Class ☐

Business/Upper Class ☐

Economy/Tourist ☒

6. Including this trip, how many return trips by air have you made to any destination in the past 12 months? (A departing and arriving flight counts as one trip.)

1-2 ☐

3-5 ☐

6-10 ☐

11-20 ☐

21 or more ☒

Write in your response or place a 'X' in the box where applicable

7. Based on your experience today, please rate THIS airport on each service item:

ACCESS

? 5 4 3 2 1
Did not notice/use Excellent Very Good Good Fair Poor

A. Ground transportation to/from airport

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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B. Parking facilities

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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C. Value for money of parking facilities

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	-------------------------------------	--------------------------	--------------------------	--------------------------

D. Availability of baggage carts/trolleys

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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CHECK-IN (at this airport)

E. Waiting time in check-in queue/line

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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F. Efficiency of check-in staff

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------

G. Courtesy and helpfulness of check-in staff

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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PASSPORT/PERSONAL ID CONTROL

H. Waiting time at passport/personal ID inspection

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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I. Courtesy and helpfulness of inspection staff

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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SECURITY

J. Courtesy and helpfulness of security staff

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	-------------------------------------	--------------------------	--------------------------

K. Thoroughness of security inspection

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------

L. Waiting time at security inspection

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	-------------------------------------	--------------------------	--------------------------	--------------------------

M. Feeling of being safe and secure

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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FINDING YOUR WAY

N. Ease of finding your way through airport

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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O. Flight information screens

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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P. Walking distance inside the terminal

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------

Q. Ease of making connections with other flights

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	-------------------------------------	--------------------------	--------------------------	--------------------------

AIRPORT FACILITIES

R. Courtesy and helpfulness of airport staff (excluding check-in, passport control and security)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	-------------------------------------	--------------------------	--------------------------

S. Restaurant/Eating facilities

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	-------------------------------------	--------------------------	--------------------------

T. Value for money of restaurant/eating facilities

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Write in your response or place a 'X' in the box where applicable

AIRPORT FACILITIES

U. Availability of bank/ATM facilities/money changers

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	-------------------------------------	--------------------------	--------------------------

V. Shopping facilities

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	-------------------------------------	--------------------------	--------------------------

W. Value for money of shopping facilities

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	-------------------------------------	--------------------------	--------------------------

X. Internet access/Wi-Fi

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	-------------------------------------	--------------------------	--------------------------

Y. Business/Executive lounges

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Z. Availability of washrooms/toilets

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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AA. Cleanliness of washrooms/toilets

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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BB. Comfort of waiting/gate areas

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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AIRPORT ENVIRONMENT

CC. Cleanliness of airport terminal

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	-------------------------------------	--------------------------	--------------------------	--------------------------

DD. Ambience of the airport

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	-------------------------------------	--------------------------	--------------------------	--------------------------

OVERALL SATISFACTION with the airport

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	-------------------------------------	--------------------------	--------------------------

8. Which of the items listed in Question 7 are MOST IMPORTANT to you at THIS airport? (Please use the letters in front of the items for your rating. e.g. J)

1st

E

(e.g. N)

2nd

H

(e.g. BE)

3rd

K

(e.g. C)

9. What was your BEST and WORST experience at THIS airport today?

BEST

CHECK IN

WORST

W122 AIR BAGGAGE DROP OFF PRIORITARY

10. Arrivals services at THIS airport: (Based on previous experience in last 3 months)

? 5 4 3 2 1
Did not notice/use Excellent Very Good Good Fair Poor

A. Passport/Personal ID inspection

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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B. Speed of baggage delivery service

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

C. Customs inspection

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

Experience even at this airport

11. If it was NOT a connecting flight, what mode of transport did you use to arrive at THIS airport?

Private/Company Car ☐ Bus/Shuttle ☒ Taxi/Limo ☐
Rail/Subway ☐ Rental Car ☐ Other ☐

12. How long before the scheduled departure time of your flight did you arrive at THIS airport?

Less than 30 mins ☐ 30-45 mins ☐ 45-60 mins ☐ 1 hr-1 hr 15 mins ☐
1 hr 15 mins-1 hr 30 mins ☐ 1 hr 30 mins-2 hrs ☒ More than 2 hrs ☐

13. When you checked in at THIS airport, did you use a: (check all that apply)

Self-service kiosk ☐ Check-in desk ☐ Internet check-in ☐
Mobile check-in ☒ Bag drop-off desk ☐ Other ☐

14. What is your nationality/country of citizenship?

American

15. What is your country of residence? (if different from above)

USA

16. Postal/Zip Code (residence):

9 8 6 7 4

17. Are you...

Male ☒

Female ☐

18. What is your age group?

16-21 ☐ 22-25 ☒ 26-34 ☐ 35-44 ☐
45-54 ☐ 55-64 ☐ 65-75 ☐ 76 & over ☐

Additional comments:

Thank you for your participation. Please return this form to the interviewer before boarding.

Interviewer: Please indicate in the boxes below the traffic, the terminal and the gate of the interview. (Please write in block capitals or place a 'X' in the box where applicable)

124 184010123 Inter. ☒ CA-US-T 2A A15 1

Code Questionnaire No. Terminal Gate No. Interviewer No.

Dear Passenger,



As part of this airport's ongoing efforts to offer the highest service quality and improve passenger experience, we kindly ask that you take some time to fill out this brief questionnaire.

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Once completed, please return this questionnaire to the interviewer before your departure. Your views regarding your airport experience today are very important to us.

Thank you.

Write in your response or place a 'X' in the box where applicable

1.

Airline Ryan Air FR Airport BUD Flight number 8417 Gate No. A15
Letters Numbers

Departure date

DD 12 MM 1 1 2018 HH 06 MM 20
(24 hours e.g. 20:15)

Departure time

2. Have you just made a connection/transfer at THIS airport?

Yes ☐ No ☒

3. Which airport are you flying to on the flight that you are about to board?

Rome CIA

4. What is/was your MAIN reason for this air trip?

Business ☐ Leisure ☒ Other ☐

5. Which section of the aircraft are you travelling in?

First Class ☐ Business/Upper Class ☐ Economy/Tourist ☒

6. Including this trip, how many return trips by air have you made to any destination in the past 12 months? (A departing and arriving flight counts as one trip.)

1-2 ☐ 3-5 ☐ 6-10 ☐ 11-20 ☒ 21 or more ☐

Write in your response or place a 'X' in the box where applicable

7. Based on your experience today, please rate THIS airport on each service item:

ACCESS

? 5 4 3 2 1
Did not notice/use ☹️☹️☹️ ☹️☹️☹️ ☹️☹️☹️ ☹️☹️☹️ ☹️☹️☹️
Excellent Very Good Good Fair Poor

A. Ground transportation to/from airport

B. Parking facilities

C. Value for money of parking facilities

D. Availability of baggage carts/trolleys

CHECK-IN (at this airport)

E. Waiting time in check-in queue/line

F. Efficiency of check-in staff

G. Courtesy and helpfulness of check-in staff

PASSPORT/PERSONAL ID CONTROL

H. Waiting time at passport/personal ID inspection

I. Courtesy and helpfulness of inspection staff

SECURITY

J. Courtesy and helpfulness of security staff

K. Thoroughness of security inspection

L. Waiting time at security inspection

M. Feeling of being safe and secure

FINDING YOUR WAY

N. Ease of finding your way through airport

O. Flight information screens

P. Walking distance inside the terminal

Q. Ease of making connections with other flights

AIRPORT FACILITIES

R. Courtesy and helpfulness of airport staff (excluding check-in, passport control and security)

S. Restaurant/Eating facilities

T. Value for money of restaurant/eating facilities

Write in your response or place a 'X' in the box where applicable

AIRPORT FACILITIES

? 5 4 3 2 1
Did not notice/use ☹️☹️☹️ ☹️☹️☹️ ☹️☹️☹️ ☹️☹️☹️ ☹️☹️☹️
Excellent Very Good Good Fair Poor

U. Availability of bank/ATM facilities/money changers

V. Shopping facilities

W. Value for money of shopping facilities

X. Internet access/Wi-Fi

Y. Business/Executive lounges

Z. Availability of washrooms/toilets

AA. Cleanliness of washrooms/toilets

BB. Comfort of waiting/gate areas

AIRPORT ENVIRONMENT

CC. Cleanliness of airport terminal

DD. Ambience of the airport

OVERALL SATISFACTION with the airport

8. Which of the items listed in Question 7 are MOST IMPORTANT to you at THIS airport? (Please use the letters in front of the items for your rating. e.g. J)

1st

DD

(e.g. N)

2nd

X

(e.g. BB)

3rd

N

(e.g. C)

9. What was your BEST and WORST experience at THIS airport today?

BEST

Ambiance / Design

WORST

10. Arrivals services at THIS airport: (Based on previous experience in last 3 months)

? 5 4 3 2 1
Did not notice/use ☹️☹️☹️ ☹️☹️☹️ ☹️☹️☹️ ☹️☹️☹️ ☹️☹️☹️
Excellent Very Good Good Fair Poor

A. Passport/Personal ID inspection

B. Speed of baggage delivery service

C. Customs inspection