

**SUSTAINABLE SPOTTED WING DROSOPHILA  
MANAGEMENT FOR UNITED STATES FRUIT CROPS**

**GROWER SURVEY**



**Introduction:**

Thank you for helping out by taking this survey. The purpose of the survey is to measure the effects of spotted wing drosophila (SWD) on fruit crop production. Results will be used to develop national research and extension projects to minimize future impacts of SWD. These may include:

- *Development of new management tactics and programs*
- *Supporting new or expanded pesticide registrations for SWD*
- *Development of educational material on SWD for growers, extension agents, and others*

Participation in the survey is voluntary. The survey does not collect personally identifying information. Data may be summarized by state, crop, farm size, or farm type, but individual survey responses are confidential and will never be shared. Summaries of aggregated survey data will be publicly available on our project website, and will also be available by request.

Funding for this project, *Sustainable Spotted Wing Drosophila Management for US Fruit Crops*, was provided by the National Institute of Food and Agriculture, U.S. Department of Agriculture Specialty Crops Research Initiative under Agreement No. 2016-51181-24252.

The survey should be completed by the person (age 18 or older) who is responsible for making pest management decisions for this growing operation.

If you have questions about the survey, please contact Hannah Burrack at [hjburrac@ncsu.edu](mailto:hjburrac@ncsu.edu), or Jean-Jacques Dubois at [jbubois@ncsu.edu](mailto:jbubois@ncsu.edu)

**If you have read the above information, are responsible for making pest management decisions for the operation, are age 18 or older, and you agree to take the survey, please check here.**

**INSTRUCTIONS FOR COMPLETING THE SURVEY**

- Please answer all questions unless directed to skip based on previous answers.
- Select one response for each question unless directed to "Select all that apply."
- If you don't know the answer or the question is not applicable to your situation, please check DK/NA (Don't Know/Not Applicable/Prefer Not to Answer).
- Instructions for each question are listed in **[brackets in bold font.]**.



**SUSTAINABLE SPOTTED WING DROSOPHILA MANAGEMENT FOR UNITED STATES FRUIT CROPS**

**GROWER SURVEY**

**IMPACT OF SWD AND ECONOMICS** \_\_\_\_\_

**1.a.** For the crops listed below, answer A and B:

- A. Please indicate the crops you have grown in the last 10 years.
- B. For each crop selected in A, indicate the number of acres of this crop grown in 2016. Please enter whole numbers or fractions to 2 decimal places (e.g., 1, 1.25, 2, 3, .66, etc.)

**[Select each crop grown in the past 10 years. For each crop selected, indicate the number of acres grown in 2016.]**

Crop	A.	B.	
	Grown in Past 10 Years?	Number of Acres Grown in 2016	DK/NA
Blueberries	a. High Bush .....	<input type="checkbox"/>	<input type="checkbox"/>
	b. Rabbiteye .....	<input type="checkbox"/>	<input type="checkbox"/>
	c. Wild .....	<input type="checkbox"/>	<input type="checkbox"/>
Raspberries	d. Fall Fruiting .....	<input type="checkbox"/>	<input type="checkbox"/>
	e. Other Varieties .....	<input type="checkbox"/>	<input type="checkbox"/>
Blackberries	f. Floricane Fruiting.....	<input type="checkbox"/>	<input type="checkbox"/>
	g. Primocane Fruiting.....	<input type="checkbox"/>	<input type="checkbox"/>
Strawberries	h. Spring Fruiting/June Bearing..	<input type="checkbox"/>	<input type="checkbox"/>
	i. Day Neutral/Ever Bearing.....	<input type="checkbox"/>	<input type="checkbox"/>
Cherries	j. Sweet.....	<input type="checkbox"/>	<input type="checkbox"/>
	k. Tart/Sour .....	<input type="checkbox"/>	<input type="checkbox"/>
None of the Above .....	<input type="checkbox"/>		

If you grew any of the crops listed above, skip to Q2 on the next page.  
If you selected "None of the Above," continue to Q1b below.

**1b.** During the last ten years, did you grow any other crops on which SWD was found?

Yes [Continue to Q2, next page] .....	<input type="checkbox"/>
No .....	<input type="checkbox"/>
<i>Don't Know</i>	<input type="checkbox"/>

**If "No" or "Don't Know" to Q1b, that concludes the survey.  
The remainder of the survey is targeted toward berry growers or growers who have found SWD on other crops.  
Thank you very much for your participation! There is no need to return this survey.**

**SUSTAINABLE SPOTTED WING DROSOPHILA MANAGEMENT FOR UNITED STATES FRUIT CROPS**

**GROWER SURVEY**

**IMPACT OF SWD AND ECONOMICS**

<p>2. For each crop grown in the last 10 years, please answer the following questions:</p> <p>A. In 2016, has SWD been found on <u>this crop</u> in your operation? <b>If “Yes” continue to B. If “No, skip to next crop. (If you didn’t grow a specific crop in 2016, select DK/NA.)</b></p> <p>B. When was the first year SWD was found on this crop? <b>Record Year or check DK/NA. Continue to C.</b></p> <p>C. At what stage was SWD first found on this crop during 2016? <b>Select one response or Other or check DK/NA. Continue to next crop. Record other crops on which SWD was found</b></p>												
Crop	A.				B.		C.					
	In 2016, SWD Has Been Found on...			DK/NA	First Year Found	DK/NA	Stage at which SWD was First Found					
	Yes	No					Bloom	Fruit Set (green fruit)	Fruit Coloring	Harvest	Other [Specify]	DK/NA
Blueberries	a. High Bush .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
	b. Rabbiteye .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
	c. Wild .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
Raspberries	d. Fall Fruiting .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
	e. Other Varieties .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
Blackberries	f. Floricane Fruiting .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
	g. Primocane Fruiting .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
Strawberries	h. Spring Fruiting/June Bearing.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
	i. Day Neutral/Ever Bearing .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
Cherries	j. Sweet .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
	k. Tart/Sour .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
Other Crops on which SWD has been found [Specify]	_____				_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
	_____				_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
	_____				_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
	_____				_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>

# SUSTAINABLE SPOTTED WING DROSOPHILA MANAGEMENT FOR UNITED STATES FRUIT CROPS

## GROWER SURVEY

### IMPACT OF SWD AND ECONOMICS

3. For each crop grown in 2016, please answer the following questions:
- A. What percentage of your product/fruit was not harvested due to SWD? [Record the percentage for 2016.]
  - B. What percentage of your product/fruit was rejected after harvest because of SWD presence? [Record the percentage for 2016. If “None” enter 0.]
  - C. What percentage of your product/fruit was rejected after harvest because it exceeded maximum pesticide residue levels? [Record the percentage for 2016. If “None” enter 0.]

Crop	A. Percent not harvested Due to SWD		B. Percent Rejected after Harvest Due to SWD		C. Percent Rejected Due to Pesticide Levels	
	%	DK/NA	%	DK/NA	%	DK/NA
Blueberries	a. High Bush .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Rabbiteye .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Wild .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Raspberries	d. Fall Fruiting .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	e. Other Varieties .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Blackberries	f. Floricane Fruiting.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	g. Primocane Fruiting.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strawberries	h. Spring Fruiting/June Bearing .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	i. Day Neutral/Ever Bearing.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cherries	j. Sweet.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	k. Tart/Sour .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Crops on which SWD has been found [Specify]	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**SUSTAINABLE SPOTTED WING DROSOPHILA MANAGEMENT FOR UNITED STATES FRUIT CROPS**

**GROWER SURVEY**

**IMPACT OF SWD AND ECONOMICS**

**4.** Has the need to manage SWD in the last 10 years resulted in increased, decreased, or unchanged insecticide use, regardless of whether you have had losses due to SWD?

[Select one response for each crop grown.]

		Change in Level of Insecticide Use			
		Decreased	Unchanged	Increased	DK/NA
Blueberries	a. High Bush .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Rabbiteye .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Wild.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Raspberries	d. Fall Fruiting.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	e. Other Varieties .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Blackberries	f. Floricane Fruiting .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	g. Primocane Fruiting.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strawberries	h. Spring Fruiting/June Bearing .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	i. Day Neutral/Ever Bearing .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cherries	j. Sweet.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	k. Tart/Sour .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Crops on which SWD has been found [Specify]	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**If ALL varieties “Stayed the Same,” skip to Q6.**

**If ANY variety “Increased” or “Decreased,” continue to Q5.**

**SUSTAINABLE SPOTTED WING DROSOPHILA MANAGEMENT FOR UNITED STATES FRUIT CROPS**

**GROWER SURVEY**

**IMPACT OF SWD AND ECONOMICS**

5. If insecticide use has **increased** or **decreased**, please answer the following questions:

For each crop grown in 2016, **regardless of whether or not you had crop loss due to SWD:**

- A. How many sprays per season did you apply in years before SWD appeared, and in 2016? [If Before SWD and 2016 are "0" skip to the next crop.]
- B. Did the cost of insecticides **increase**, **decrease**, or **stay the same**?
- C. What was the dollar amount of the change? [Round to nearest dollar. If *no change*, record \$0.]

[For each crop selected in A, answer B and C.]		A. Number of Sprays...				B. Change in Cost per Acre				C. Total Cost of Change	
		Before SWD	DK/NA	In 2016	DK/NA	Increase	Decrease	No Change	DK/NA	Dollar Amount	DK/NA
Blueberries	a. High Bush .....	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>
	b. Rabbiteye .....	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>
	c. Wild.....	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>
Raspberries	d. Fall Fruiting .....	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>
	e. Other Varieties .....	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>
Blackberries	f. Floricane Fruiting.....	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>
	g. Primocane Fruiting.....	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>
Strawberries	h. Spring Fruiting/June Bearing ....	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>
	i. Day Neutral/Ever Bearing.....	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>
Cherries	j. Sweet.....	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>
	k. Tart/Sour .....	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>
Other Crops on which SWD has been found [Specify]	_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>
	_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>
	_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>
	_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>

**SUSTAINABLE SPOTTED WING DROSOPHILA MANAGEMENT FOR UNITED STATES FRUIT CROPS**

**GROWER SURVEY**

**IMPACT OF SWD AND ECONOMICS**

**6. Have your labor costs increased, decreased, or stayed the same because of SWD? [Select one response and skip as directed.]**

Increased .....	<input type="checkbox"/>
Decreased.....	<input type="checkbox"/>
Stayed the Same <b>[Skip to Q8]</b> .....	<input type="checkbox"/>
<i>Don't Know /Prefer not to Answer [Skip to Q8]</i>	

**7. Please indicate the percent change in cost. [Enter number. See instructions below.]**

	_____ %
<i>Don't Know .....</i> <input type="checkbox"/>	

**RECORDING PERCENT CHANGE:**  
 If your cost doubled, enter '100%'; if it tripled, enter '200%.' For example:

- If I had 50 and now I have 100, that's a 100% increase.
- If I had 50 and now I have 150, that's a 200% increase.
- If I had 50 and now I have 200, that's a 300% increase, etc."

<b>8. Have you reduced or eliminated your bearing acreage due at least in part to SWD? [Record "100%" for acreage you eliminated completely and "0%" if you have eliminated no acreage due to SWD.]</b>		<b>Percent Reduction</b>	<i>DK/NA</i>
Blueberries	High Bush .....	_____ %	<input type="checkbox"/>
	Rabbiteye .....	_____ %	<input type="checkbox"/>
	Wild .....	_____ %	<input type="checkbox"/>
Raspberries	Fall Fruiting .....	_____ %	<input type="checkbox"/>
	Other Varieties .....	_____ %	<input type="checkbox"/>
Blackberries	Floricane Fruiting .....	_____ %	<input type="checkbox"/>
	Primocane Fruiting .....	_____ %	<input type="checkbox"/>
Strawberries	Spring Fruiting/June Bearing .....	_____ %	<input type="checkbox"/>
	Day Neutral/Ever Bearing.....	_____ %	<input type="checkbox"/>
Cherries	Sweet .....	_____ %	<input type="checkbox"/>
	Tart/Sour .....	_____ %	<input type="checkbox"/>
Other Crops on which SWD has been found <b>[Specify]</b>	_____	_____ %	<input type="checkbox"/>
	_____	_____ %	<input type="checkbox"/>
	_____	_____ %	<input type="checkbox"/>
	_____	_____ %	<input type="checkbox"/>

**SUSTAINABLE SPOTTED WING DROSOPHILA MANAGEMENT FOR UNITED STATES FRUIT CROPS  
GROWER SURVEY**

**IMPACT OF SWD AND ECONOMICS** \_\_\_\_\_

<b>9.</b>	Have you experienced any other impacts due to SWD?	Yes [ <b>Continue to Q10</b> ]..... <input type="checkbox"/> No [ <b>Skip to Q11</b> ] ..... <input type="checkbox"/> <i>Don't Know / Not Applicable</i> [ <b>Skip to Q11</b> ] <input type="checkbox"/>
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<b>10.</b>	Please describe other impacts of SWD that you have experienced.

**PRACTICES/PESTICIDE USAGE (2016 SEASON)** \_\_\_\_\_

<b>11.</b>	Which of the following did you use to manage SWD in 2016, whether or not SWD was a problem? [Select all that apply.]
<b>Insecticides</b>	a. Insecticides applied pre-harvest ..... <input type="checkbox"/> b. Insecticides applied during harvest ..... <input type="checkbox"/> c. Insecticides applied post-harvest ..... <input type="checkbox"/>
<b>Other Methods</b>	d. Mass trapping to kill adults ..... <input type="checkbox"/> e. Exclusion netting ..... <input type="checkbox"/> f. Monitoring adults with traps ..... <input type="checkbox"/> g. Increased harvest frequency ..... <input type="checkbox"/> h. Post-harvest sorting ..... <input type="checkbox"/> i. Post-harvest cold storage ..... <input type="checkbox"/> j. Sanitation ..... <input type="checkbox"/>
	Other [ <b>Specify up to two</b> ] 1) _____ 2) _____
	k. Did not treat for or manage SWD [ <b>Skip to Q19</b> ] ..... <input type="checkbox"/>
<i>Don't Know / Not Applicable</i> [ <b>Skip to Q19</b> ]..... <input type="checkbox"/>	

**If you used insecticides (selected a, b, or c in Q11), continue to Q12**

**If you did not use insecticides (d - j) or Other, skip to Q19.**



**SUSTAINABLE SPOTTED WING DROSOPHILA MANAGEMENT FOR UNITED STATES FRUIT CROPS**

**GROWER SURVEY**

**PRACTICES/PESTICIDE USAGE (2016 SEASON)** \_\_\_\_\_

**12. If you used insecticides during the 2016 season:**

To what extent did you follow a pre-set, calendar-based spraying schedule for SWD?

- 100% Preset, Calendar-Based .....
- Mostly Preset, Calendar-Based .....
- About Half and Half .....
- Mostly Separate Decision Each Time .....
- 100% Separate Decision Each Time .....

*Don't Know / Not Applicable*.....

**If you used less than 100% preset calendar-based spray, continue to Q13.**

**If you used 100% preset calendar-based spray, skip to Q16.**

**13. If you used less than 100% calendar-based decisions, was this because:**

- I only use insecticides when needed [Skip to Q15] .....
- I wanted to schedule treatments but I was not able to [Continue to Q14] .....
- I was concerned about risks of calendar treatments [Skip to Q15].....

*Don't Know / Not Applicable [Skip to Q16]*.....

**14. If you used less than 100% preset calendar-based spray:**

Why were you not able to schedule treatments?

**[Select three factors from the list and/or from "Other Factors." Skip to Q16]**

- a. It could not be fit in the schedule. ....
- b. Rainfall disrupted the timing of my sprays. ....
- c. Concerns about pesticide residues for export.....
- d. It was too close to the Pre Harvest Interval.....
- e. Cost of Insecticide.....

Other Factor(s) in the Top Three [Specify]

- f. \_\_\_\_\_
- g. \_\_\_\_\_
- h. \_\_\_\_\_

*Don't Know / Not Applicable*.....

**Skip to Q16.**

**SUSTAINABLE SPOTTED WING DROSOPHILA MANAGEMENT FOR UNITED STATES FRUIT CROPS**

**GROWER SURVEY**

**PRACTICES/PESTICIDE USAGE (2016 SEASON)** \_\_\_\_\_

**15. What risks were you concerned about? [Select all that apply.]**

a. Concerns about pesticide residues for export.....	<input type="checkbox"/>
b. Concerns about insect resistance.....	<input type="checkbox"/>
c. Cost of Insecticide.....	<input type="checkbox"/>
d. Personal concern for customer exposure.....	<input type="checkbox"/>
e. Personal concern for operator exposure.....	<input type="checkbox"/>
Other [Specify] _____	
<i>Don't Know / Not Applicable.....</i> <input type="checkbox"/>	

**16. When did you start applying insecticide to control SWD?**

Bloom.....	<input type="checkbox"/>
Fruit Set (green fruit).....	<input type="checkbox"/>
Fruit Coloring.....	<input type="checkbox"/>
Harvest.....	<input type="checkbox"/>
Based on Adult Monitoring.....	<input type="checkbox"/>
Presence of Infested Fruit.....	<input type="checkbox"/>
Reports from Extension Office.....	<input type="checkbox"/>
Information from Neighbors.....	<input type="checkbox"/>
Other [Specify] _____	
<i>Don't Know / Not Applicable.....</i> <input type="checkbox"/>	

**17. At what frequency did you apply insecticide to control SWD?**

Weekly, consistently.....	<input type="checkbox"/>
Weekly, but we skipped some weeks when weather or harvesting interferes.....	<input type="checkbox"/>
Bi-weekly, but we skipped some sprays when weather or harvesting interferes..	<input type="checkbox"/>
No set schedule. Completely dependent on weather.....	<input type="checkbox"/>
When I had time and it didn't interfere with picking.....	<input type="checkbox"/>
Other Specify] _____	
<i>Don't Know / Not Applicable.....</i> <input type="checkbox"/>	

**18. Which of the following insecticide application methods did you use for SWD? [Select all that apply.]**

a. Plane.....	<input type="checkbox"/>
b. Drone.....	<input type="checkbox"/>
c. Ground application.....	<input type="checkbox"/>
d. Backpack sprayers.....	<input type="checkbox"/>
e. Overhead irrigation.....	<input type="checkbox"/>
Other [Specify] _____	
<i>Don't Know / Not Applicable.....</i> <input type="checkbox"/>	

**SUSTAINABLE SPOTTED WING DROSOPHILA MANAGEMENT FOR UNITED STATES FRUIT CROPS  
GROWER SURVEY**

**PRACTICES/PESTICIDE USAGE (2016 SEASON)** \_\_\_\_\_

**19.** Please indicate the monitoring methods you used for SWD in 2016. **[Select all that apply.]**

	<p><b>a.</b> Traps..... <input type="checkbox"/></p> <p><b>b.</b> Salt or Sugar Test ..... <input type="checkbox"/></p> <p><b>c.</b> Fruit Sampling /Smash fruit to count larva ..... <input type="checkbox"/></p> <p><b>d.</b> Crop Consultant..... <input type="checkbox"/></p> <p><b>e.</b> Extension Agent Reports..... <input type="checkbox"/></p> <p><b>f.</b> Did not monitor for SWD..... <input type="checkbox"/></p> <p>Other <b>[Specify]</b></p> <p><b>g.</b> _____</p> <p><b>h.</b> _____</p>	
<i>Don't Know / Not Applicable</i> .....		<input type="checkbox"/>

**If you monitored to SWD (options a-e above): Skip to Q21.**

**If you did not monitor for SWD (option f above): Continue to Q20.**

**20.** Why didn't you monitor? **[Select all that apply.]**

	<p><b>a.</b> Too expensive ..... <input type="checkbox"/></p> <p><b>b.</b> Managed preventively..... <input type="checkbox"/></p> <p><b>c.</b> Too difficult to ID flies/larvae... ..... <input type="checkbox"/></p> <p>Other <b>[Specify]</b> _____</p>	
<i>Don't Know / Not Applicable</i> .....		<input type="checkbox"/>

**21.** Which post-harvest practices did you use in 2016? **[Select all that apply.]**

	<p><b>a.</b> Fruit was taken directly to packing house or distributor .... <input type="checkbox"/></p> <p><b>b.</b> Fruit was sorted while picking..... <input type="checkbox"/></p> <p><b>c.</b> Fruit was sorted after picking by hand... ..... <input type="checkbox"/></p> <p><b>d.</b> Fruit was sorted after picking by machine ..... <input type="checkbox"/></p> <p><b>e.</b> Fruit was stored in cold storage ..... <input type="checkbox"/></p> <p><b>f.</b> Fruit was picked by consumers (You-Pick)..... <input type="checkbox"/></p> <p>Other <b>[Specify]</b> _____</p> <p>_____</p>	
<i>Don't Know / Not Applicable</i> .....		<input type="checkbox"/>

**SUSTAINABLE SPOTTED WING DROSOPHILA MANAGEMENT FOR UNITED STATES FRUIT CROPS**

**GROWER SURVEY**

**PRACTICES/PESTICIDE USAGE (2016 SEASON)** \_\_\_\_\_

**22. In the 2016 growing season, what did you do with infested fruit? [Select all that apply. If you found no infested fruit, select Not Applicable.]**

<b>a.</b>	Discard on site/throw on ground .....	<input type="checkbox"/>
<b>b.</b>	Discard away from crop field.....	<input type="checkbox"/>
<b>c.</b>	Solarize (cook in black trash bag left in the sun) .....	<input type="checkbox"/>
<b>d.</b>	Feed to animals on my farm or another farm .....	<input type="checkbox"/>
<b>e.</b>	Process for juice or other product.....	<input type="checkbox"/>
Other [Specify] _____		
<i>Don't Know / Not Applicable.....</i>		<input type="checkbox"/>

**USE AND KNOWLEDGE OF SWD CONTROL PRACTICES** \_\_\_\_\_

**23. [To the best of your knowledge, please indicate whether you believe each statement to be true or false.]**

	True	False	DK/NA
<b>In your region:</b>			
<b>a.</b> SWD are only active in the warmer growing months/growing season...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>b.</b> SWD are active year-round .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>c.</b> SWD are more active in areas of high humidity/moisture.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>d.</b> SWD are less active in areas of high humidity/moisture.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>e.</b> SWD can infest only ripe fruit.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>f.</b> SWD can infest fruit once it starts to ripen .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>g.</b> SWD overwinter as adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>h.</b> SWD overwinter as immatures (eggs, larvae, and/or pupae) .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>i.</b> SWD populations are local within a state or region .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>j.</b> SWD populations move throughout North America .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>k.</b> SWD do not use hosts outside of crop fields.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>l.</b> SWD use a narrow range of hosts that are similar to the crop hosts (e.g. wild blackberry) .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>m.</b> SWD use a broad range of hosts that may or may not be similar to crop hosts .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**SUSTAINABLE SPOTTED WING DROSOPHILA MANAGEMENT FOR UNITED STATES FRUIT CROPS  
GROWER SURVEY**

**USE AND KNOWLEDGE OF SWD CONTROL PRACTICES** \_\_\_\_\_

<b>24. [To the best of your knowledge, please indicate whether you believe each statement to be true or false for SWD.]</b>			
	<b>True</b>	<b>False</b>	<b>DK/NA</b>
<b>a.</b> Insecticides currently used work the same throughout North America	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>b.</b> Insecticides have different efficacy depending on crop.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>c.</b> Insecticides have different efficacy depending on application technology (e.g. aerial vs. ground-based sprays).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>d.</b> Insecticides have differences in longevity depending on climatic region.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>e.</b> Insecticides that deter egg laying but do not outright kill adult SWD are not as effective as those that kill on contact.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**FARM INFORMATION** \_\_\_\_\_

<b>25. Where is/are your farm(s) located? [Record State(s). If outside US mainland, record location.]</b>
<b>US State(s)</b> _____
<b>Other Location(s)</b> _____
<i>Prefer Not to Answer</i> <input type="checkbox"/>

<b>26. How is your fruit sold? [Select all that apply.]</b>
<b>a.</b> Wholesale, Export..... <input type="checkbox"/>
<b>b.</b> Wholesale, Domestic ..... <input type="checkbox"/>
<b>c.</b> Direct market (e.g. You-Pick, Farmers Market, Farm Stand)..... <input type="checkbox"/>
<b>Other [Specify]</b> _____
<i>Prefer Not to Answer</i> <input type="checkbox"/>

<b>27. What best describes your farm? [Select all that apply.]</b>
<b>a.</b> Conventional..... <input type="checkbox"/>
<b>b.</b> Organic ..... <input type="checkbox"/>
<b>c.</b> Transitional ..... <input type="checkbox"/>
<b>d.</b> No spray..... <input type="checkbox"/>
<b>e.</b> Some conventional, some organic ..... <input type="checkbox"/>
<b>Other [Specify]</b> _____
<i>Prefer Not to Answer</i> <input type="checkbox"/>

**SUSTAINABLE SPOTTED WING DROSOPHILA MANAGEMENT FOR UNITED STATES FRUIT CROPS  
GROWER SURVEY**

**FARM INFORMATION** \_\_\_\_\_

**28.** Is your fruit used for: **[Select all that apply.]**

<b>a.</b>	Fresh market .....	<input type="checkbox"/>
<b>b.</b>	Frozen products .....	<input type="checkbox"/>
<b>c.</b>	Processed products.....	<input type="checkbox"/>
Other <b>[Specify]</b> _____		
<i>Prefer Not to Answer</i>		<input type="checkbox"/>

**29.** Who has responsibility for making pest management decisions for your farm? **[Select one response. If more than one, describe in Other.]**

	Owner.....	<input type="checkbox"/>
	Farm manager.....	<input type="checkbox"/>
	A staff member who is dedicated primarily to pest management decision-making .....	<input type="checkbox"/>
	Independent consultant.....	<input type="checkbox"/>
	Chemical dealer representative.....	<input type="checkbox"/>
Other <b>[Specify]</b> _____		
<i>Prefer Not to Answer</i>		<input type="checkbox"/>

**30.** How do you prefer to receive information about pest management? **[Rank the following in order of preference from 1 to 11 with “1” as the top preferred method.]**

	Source	Rank
<b>a.</b>	Text messaging.....	_____
<b>b.</b>	University or Extension website.....	_____
<b>c.</b>	Industry website. ....	_____
<b>d.</b>	Other internet source .....	_____
<b>e.</b>	Social media (Facebook, Twitter, etc.).....	_____
<b>f.</b>	Ag Chemical Guide for my state.....	_____
<b>g.</b>	Email .....	_____
<b>h.</b>	Production guides/pest bulletins.....	_____
<b>i.</b>	In-person meetings with Extension agent.....	_____
<b>j.</b>	Chemical dealer.....	_____
<b>k.</b>	Crop consultant .....	_____
Other <b>[Specify]</b> _____		
<i>Prefer Not to Answer</i>		<input type="checkbox"/>

**SUSTAINABLE SPOTTED WING DROSOPHILA MANAGEMENT FOR UNITED STATES FRUIT CROPS**

**GROWER SURVEY**

**FARM INFORMATION** \_\_\_\_\_

**31.** When deciding to apply insecticide, what sources of information do you use? [Rank the following from 1 to 6 in order of how important they are in your decision with “1” as the most important source. Specify other important sources of information.]

	Source	Rank
a.	Advice from Extension agent or specialist .....	_____
b.	Advice from chemical dealer .....	_____
c.	My state’s Ag Chemical Manual. ....	_____
d.	Other growers .....	_____
e.	Advice from independent consultant .....	_____
f.	Internet .....	_____
	Other Sources [Specify] _____	

*Prefer Not to Answer*

**32.** On what topics do you most need information? [Rank the following in order of importance from 1 to 7 with “1” as the most important topic. Specify other important topics.]

	Source	Rank
a.	SWD biology .....	_____
b.	Forecasting SWD risk .....	_____
c.	Resistance to insecticides .....	_____
d.	Scouting .....	_____
e.	Insecticide efficacy .....	_____
f.	Non-chemical SWD management .....	_____
	Other Topics [Specify] _____	

*Prefer Not to Answer*

**33.** How do you prefer to receive training from extension about pest management/? [Rank the following in order of importance from 1 to 6 with “1” as the most important topic. Specify other needed training.]

	Source	Rank
a.	Publications .....	_____
b.	Website .....	_____
c.	Webinar .....	_____
d.	Field Days .....	_____
e.	Extension meetings .....	_____
f.	Mobile App .....	_____
	Other Needed Training [Specify] _____	

*Prefer Not to Answer*

**SUSTAINABLE SPOTTED WING DROSOPHILA MANAGEMENT FOR UNITED STATES FRUIT CROPS**

**GROWER SURVEY**

**GM CONTROL METHODS**

It is possible that technologies could genetically modify the SWD to eliminate it locally. This technology would only be used once a permit from USDA was obtained, certifying the technology did not pose a significant risk to human health or the environment. For this technology to be effective, it would have to be deployed 'areawide', meaning all farms and SWD-susceptible crops within a defined area would be affected by a release.

**34.** To what extent would you support research and development of such technologies?

Fully .....	[Skip to Q36]	<input type="checkbox"/>
Somewhat.....	[Continue to Q35]	<input type="checkbox"/>
Not at all.....	[Continue to Q35]	<input type="checkbox"/>
<i>Prefer Not to Answer</i>		<input type="checkbox"/>

**35.** If you do not support these GM technologies, please indicate why. **[Select all that apply.]**

<b>a.</b> This sounds too expensive .....	<input type="checkbox"/>	
<b>b.</b> The benefits are too uncertain. ....	<input type="checkbox"/>	
<b>c.</b> There are more effective approaches available.....	<input type="checkbox"/>	
<b>d.</b> There are cheaper approaches available. ....	<input type="checkbox"/>	
<b>e.</b> I'm concerned that I would get a lower price for my fruit if such technologies were used to prevent SWD infestations.....	<input type="checkbox"/>	
<b>f.</b> I'm concerned that using these technologies would pose too much risk to the environment. ....	<input type="checkbox"/>	
<b>g.</b> I am not personally against them, but my customers or the public in general are. ....	<input type="checkbox"/>	
<b>h.</b> I don't like the 'areawide' impact of this technology and/or I don't want to lose control of how SWD is managed on my farm. ....	<input type="checkbox"/>	
Other <b>[Specify]</b> _____		
_____		
_____		
_____		
_____		
<i>Prefer Not to Answer</i>		<input type="checkbox"/>



**SUSTAINABLE SPOTTED WING DROSOPHILA MANAGEMENT FOR UNITED STATES FRUIT CROPS**

**GROWER SURVEY**

**INTEGRATED PEST MANAGEMENT**

36. Please indicate your level of agreement with the following statements:

	Level of Agreement					Don't Know/ Not Applicable
	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	
a. IPM takes too much effort.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. The advantages of IPM outweigh the disadvantages.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Extension recommendations are trustworthy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

37. Please rate your level of knowledge and interest in IPM:

	Rating					Don't Know/ Not Applicable
	Well Below Average	Below Average	Average	Above Average	Well Above Average	
a. Compared to other growers, my <b>knowledge</b> of IPM is....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Compared to other growers, my <b>interest</b> in IPM is ....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**BACKGROUND INFORMATION**

38. What is your age? **[Enter age in years. Round to the nearest year.]** \_\_\_\_\_  
 Prefer Not to Answer

39. What is your current primary occupation?

a. Grower .....	<input type="checkbox"/>
b. Other [Specify] _____	

Prefer Not to Answer

40. How many years have you spent in your current primary occupation? **[Enter number of years. Round to the nearest year. If less than 1 year, please enter "0"]** \_\_\_\_\_  
 Prefer Not to Answer

41. What is your gender?

Female .....	<input type="checkbox"/>
Male.....	<input type="checkbox"/>

Prefer not to Answer

**SUSTAINABLE SPOTTED WING DROSOPHILA MANAGEMENT FOR UNITED STATES FRUIT CROPS  
GROWER SURVEY**

**BACKGROUND INFORMATION**

<b>42.</b> Are you of Hispanic, Latino, or Spanish origin?	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Yes .....</td> <td align="right"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">No.....</td> <td align="right"><input type="checkbox"/></td> </tr> <tr> <td align="center" colspan="2" style="padding: 2px;"><i>Prefer not to Answer</i></td> </tr> </table>	Yes .....	<input type="checkbox"/>	No.....	<input type="checkbox"/>	<i>Prefer not to Answer</i>									
Yes .....	<input type="checkbox"/>														
No.....	<input type="checkbox"/>														
<i>Prefer not to Answer</i>															
<b>43.</b> With which race do you most identify?)															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">African American/Black.....</td> <td align="right"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">American Indian/Alaskan Native .....</td> <td align="right"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Asian/Pacific Islander .....</td> <td align="right"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Caucasian/White.....</td> <td align="right"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Other [<b>Specify</b>] _____</td> <td></td> </tr> <tr> <td align="center" colspan="2" style="padding: 2px;"><i>Prefer not to Answer</i></td> </tr> </table>		African American/Black.....	<input type="checkbox"/>	American Indian/Alaskan Native .....	<input type="checkbox"/>	Asian/Pacific Islander .....	<input type="checkbox"/>	Caucasian/White.....	<input type="checkbox"/>	Other [ <b>Specify</b> ] _____		<i>Prefer not to Answer</i>			
African American/Black.....	<input type="checkbox"/>														
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Asian/Pacific Islander .....	<input type="checkbox"/>														
Caucasian/White.....	<input type="checkbox"/>														
Other [ <b>Specify</b> ] _____															
<i>Prefer not to Answer</i>															
<b>44.</b> What educational level have you completed?															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Less than High School .....</td> <td align="right"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">High School Graduate/GED .....</td> <td align="right"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Some College .....</td> <td align="right"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Associate’s Degree .....</td> <td align="right"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">College Graduate .....</td> <td align="right"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Graduate School or Higher .....</td> <td align="right"><input type="checkbox"/></td> </tr> <tr> <td align="center" colspan="2" style="padding: 2px;"><i>Prefer not to Answer</i></td> </tr> </table>		Less than High School .....	<input type="checkbox"/>	High School Graduate/GED .....	<input type="checkbox"/>	Some College .....	<input type="checkbox"/>	Associate’s Degree .....	<input type="checkbox"/>	College Graduate .....	<input type="checkbox"/>	Graduate School or Higher .....	<input type="checkbox"/>	<i>Prefer not to Answer</i>	
Less than High School .....	<input type="checkbox"/>														
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Associate’s Degree .....	<input type="checkbox"/>														
College Graduate .....	<input type="checkbox"/>														
Graduate School or Higher .....	<input type="checkbox"/>														
<i>Prefer not to Answer</i>															

***That concludes the survey. Thanks for your participation!***

Please return the survey before March 30 by fax (919-515-3642) OR mail to:  
 Center for Urban Affairs & Community Services (SWD Survey)  
 NC State University  
 Campus Box 7401  
 Raleigh, NC 27695-7401

**Please do not include your name on the survey or on the envelope.**