



FRESNO STATE POLICE DEPARTMENT TRAFFIC OPERATIONS

2311 E Barstow Ave, M/S PO14 (559) 278-2277
 Fresno, CA 93740 (559) 278-7538 (fax)

ALTERNATIVE TRANSPORTATION REGISTRATION

ELIGIBILITY:

Faculty and Staff that work full time and are receiving benefits are eligible to register for the Alternative Transportation Program.

APPLICANT INFORMATION				
FIRST	LAST	PEOPLESOFT ID	<input type="checkbox"/> Fresno State Staff <input type="checkbox"/> Fresno State Faculty	
STREET ADDRESS		CITY	STATE	ZIP
DEPARTMENT		CAMPUS EMAIL	PHONE EXT	MAIL STOP

ALTERNATIVE TRANSPORTATION MODES
<p><i>I will use one or more of the following alternative transportation modes in my commute to the university:</i></p> <div style="display: flex; flex-wrap: wrap; justify-content: space-between;"> <div style="width: 30%;"><input type="checkbox"/> CARPOOL</div> <div style="width: 30%;"><input type="checkbox"/> BUS</div> <div style="width: 30%;"><input type="checkbox"/> WALK</div> <div style="width: 30%;"><input type="checkbox"/> TELECOMMUTE</div> <div style="width: 30%;"><input type="checkbox"/> MOTORCYCLE</div> <div style="width: 30%;"><input type="checkbox"/> BIKE</div> <div style="width: 30%;"><input type="checkbox"/> ALTERNATIVE FUEL VEHICLE</div> </div>

POLICE DEPARTMENT USE ONLY			
<input type="checkbox"/> FT STATUS VERIFIED <div style="text-align: center;">_____</div> (INITIALS)	DATE	<input type="checkbox"/> ENTERED INTO DATABASE <div style="text-align: center;">_____</div> (INITIALS)	DATE



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TRAFFIC OPERATIONS

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ALTERNATIVE TRANSPORTATION FACULTY/STAFF RIDESHARE PERMIT APPLICATION

REQUIREMENTS

- | | | | | |
|--------------------------|--|--------------------|--------------------|--------------------|
| <input type="checkbox"/> | Two (2) or more Fresno State staff/faculty employees | _____ | _____ | _____ |
| | | <i>Initials #1</i> | <i>Initials #2</i> | <i>Initials #3</i> |
| <input type="checkbox"/> | Commit to carpool a minimum of two (2) days a week. | _____ | _____ | _____ |
| | | <i>Initials #1</i> | <i>Initials #2</i> | <i>Initials #3</i> |

PROGRAM RULES

- | | | | | |
|--------------------------|--|--------------------|--------------------|--------------------|
| <input type="checkbox"/> | Each carpool group will receive one (1) Rideshare Permit to share. | _____ | _____ | _____ |
| | | <i>Initials #1</i> | <i>Initials #2</i> | <i>Initials #3</i> |
| <input type="checkbox"/> | When using the Rideshare Spaces: | | | |
| | Paid Parking must be displayed | _____ | _____ | _____ |
| | | <i>Initials #1</i> | <i>Initials #2</i> | <i>Initials #3</i> |
| | Rideshare Permit must be displayed | _____ | _____ | _____ |
| | | <i>Initials #1</i> | <i>Initials #2</i> | <i>Initials #3</i> |
| <input type="checkbox"/> | Rideshare spaces may only be used when carpooling. | _____ | _____ | _____ |
| | | <i>Initials #1</i> | <i>Initials #2</i> | <i>Initials #3</i> |

CARPOOLER INFORMATION

NAME #1	SIGNATURE	DATE
NAME #2	SIGNATURE	DATE
NAME #3	SIGNATURE	DATE

POLICE DEPARTMENT USE ONLY

RIDESHARE PERMIT #	ISSUED BY	DATE
COMMENTS <hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/>		