CERRITOS COLLEGE POLICE DEPARTMENT

Memorandum

TO: New or Re-Active Rideshare Participant
FROM: Michelle Dawkins, Parking Coordinator/Campus Police Department
DATE: December 4, 2008
RE: Rideshare Sign-up Application

Welcome to Cerritos College! My name is Michelle Dawkins and I am the Employee Transportation Coordinator for Cerritos College. The Employee Commute Rideshare Program is offered to all employees of Cerritos College with the benefit of earning up to six (6) hours of vacation time per quarter or up to $45.00 cash per quarter. Only full-time employees have the option of receiving either vacation hours or pay, all part-time employees are offered only the cash benefit.

Attached is the alternative transportation program application. Please fill out the first two pages and return to my office at the Campus Police Department. Once your application is received and processed, you will receive a “Certified Carpooler” parking permit that will be used in conjunction with your staff parking permit to park in the designated Carpool Parking spaces which are located throughout the campus. If you have any carpool partner(s), they also need to request an application and return it to my office.

Please make your own copies of the Monthly Alternative Transportation Verification Form; this form will be turned in at the end of each month. Please make sure that you read the instructions for completing the form and that the form is completely filled out and signed by you and your immediate supervisor.

Thank you for joining the effort to clean up our air. If you have any questions, please feel free to contact me, Michelle Dawkins, at extension #2326.

Attachments
CERRITOS COLLEGE – EMPLOYEE RIDESHRARING AGREEMENT

The below listed employees hereby agree to the following provisions of the Cerritos College Ridesharing Agreement:

1. Each member will purchase a parking permit.
2. Each member will display their individual staff parking permit so they are clearly visible.
3. Each member bringing a student to any school campus, a child to a child daycare center, or a babysitter must request a carpool pass to display with their parking permit from the ETC.

Cerritos College agrees to assist the below listed employees by providing the following:

1. A designated parking space for the rideshare vehicle in lot____________________ (please choose).
2. A guaranteed ride home for any member of the rideshare group who needs to leave due to illness of family emergency.

<table>
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<tr>
<th>Print Name</th>
<th>Employee # &amp; SS #</th>
<th>Parking Permit #</th>
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The undersigned agrees to abide by the terms of this agreement and to notify the college Employee Transportation Coordinator if there any changes or additions to this rideshare group. Each member of the rideshare group must sign and date below. Each member of the rideshare group must submit a separate enrollment form and ridesharing agreement.

Signature                               Date

____________________________________  ______________________________________

____________________________________  ______________________________________

____________________________________  ______________________________________

____________________________________  ______________________________________
CERRITOS COLLEGE – EMPLOYEE RIDESHARING AGREEMENT

I, __________________________, have been working the hours of ______________ to ______________ (do not use military time). My employee # is ______________ and my Social Security # is ____________________________. I hereby agree to enroll in the Cerritos College Alternative Transportation Program by participating in one or more of the following activities.

1. Walking to work.
2. Riding a bicycle to work.
3. Riding a bus to work.
4. Participating in a rideshare group.
5. Other alternative to driving along (i.e. childcare, 9/80 work schedule, dropped off by another employee from a different employer, riding with a student, dropped off a child or student at a school, ride to work with another employee, etc.).

Cerritos College agrees to pay me one dollar twenty-five cents ($1.25)* or ten (10) minutes of vacation time (classified and management employees only) for each point that I earn by participating in one or more of the above activities. Incentives will be paid at the end of each three (3) month quarter. Vacation time will be rounded up if over one-half (1/2) of a fifteen (15) minute increment or rounded down if less than one-half (1/2) of a fifteen (15) minute increment. A MAXIMUM OF THIRTY-SIX (36) POINTS WILL BE PAID PER QUARTER.

I elect:

☐ To be paid a taxable monetary incentive which will be included in my regular payroll warrant at the end of each quarter (available to all employees).

☐ To earn a vacation incentive which will be kept on file in the payroll department (classified and management only).

Participant: ____________________________

Signature ____________________________
Ext. ____________________________ Date ____________________________

Received by: ____________________________

ETC Ext. ____________________________ Date ____________________________

ATP-1 Rev. (01/04)
Alternative Transportation Verification Form

Name: _____________________________ SS#: ________________________________

Work Location: ______________________ Emp. #: _____________________________

Verification For: ______________________ ________________________________

Month Year

INSTRUCTIONS FOR COMPLETING THIS FORM:

1. Please circle the commute code and the number for each day which you participated, leave weekends or days driven alone blank.
2. Obtain immediate manager’s signature as verification.
3. Sign and date this form.
4. Submit this form to the Employee Transportation Coordinator – Michelle Dawkins no later than 3 working days after the end of each month to the Campus Police.
5. This form must be filled out completely to receive credit.

Commute Code:

Carpool  Bus  Bike  CNG  Walk  Child Care  9/80  Dropped Off  Telecommute

(Circle)

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31

Total Days: __________

Alternative Transportation Incentives: VACATION / CASH to be credited quarterly

(Circle One)

I certify attendance as shown above:

________________________________________  _______________  __________
Signature of Immediate Manager                          Extension                     Date

I certify that I have participated in the Alternative Transportation Program as indicated above and in accordance with the provisions of the enrollment agreement signed by me. Any falsification will immediately terminate my enrollment in the program.

________________________________________  _______________  __________
Signature of Participant                          Extension                     Date

ATP-12/2005