

**REGIONAL TRANSIT**  
**REQUEST FOR DEPENDENT(S) TRANSIT PASS**  
**PLEASE ADDRESS ALL QUESTIONS TO THE BENEFITS ADMINISTRATOR**  
*(Once this form is received by H.R., allow 5 working days for processing)*

Employee must fill out all areas where applicable **AND** sign/date below *(RT Employees' ID badge is their transit pass, except retirees)*

<b>Name:</b>		<b>Employee No.:</b>	
<b>Hire Date:</b>		<b>Department Name:</b>	

<b>ALL PAPERWORK WILL BE RETURNED TO YOU VIA INTER-OFFICE MAIL.</b> <i>(Only Retirees paperwork may be mailed to their home address).</i>  <b>IF YOU WOULD LIKE TO PICK UP PAPERWORK IN HUMAN RESOURCES, CHECK BELOW.</b> <i>(Paperwork not picked up within 10 days will be sent to your department)</i>  _____ Will Pick-up at H.R.	<b>PLEASE CHECK ALL THAT APPLY</b>  <input type="checkbox"/> Active Employee <input type="checkbox"/> Retired Employee <input type="checkbox"/> <b>If retired</b> check here if you are requesting pass for yourself <input type="checkbox"/> Spouse of deceased employee <input type="checkbox"/> Dependent of deceased employee	<input type="checkbox"/> <b>LOST</b> <input type="checkbox"/> <b>STOLEN</b> <b>TRANSIT PASS</b> <i>(\$3.00 fee, 5 day waiting period)</i>  ↓ <b>This Section For Office Use Only</b> ↓ Date Reported to HR: _____  Date Reissued: _____ Amount Collected By Customer Relations: \$ _____
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<b>DEPENDENT(S)</b> <i>(Fill out as applicable)</i>						↓ For Office Use Only ↓
<b>FIRST and LAST Name(s)</b> Required For All Dependents	<b>Sex</b> M/F	<b>Date of Birth</b> (XX/XX/XX)	<b>Is spouse an RT Employee?</b> Yes/No	<b>Pass Expiration</b>	<b>Date Pass Issued</b>	
<b>Spouse/Domestic Partner:</b>			Active <input type="checkbox"/> Retired <input type="checkbox"/> No <input type="checkbox"/>			
↓ <b>Children</b> ↓ <i>(child must be 5 years of age or older &amp; meet all requirements below)</i>	<b>Relationship to You</b> (son, daughter, etc.)	<b>Sex</b> M/F	<b>Date of Birth</b> (XX/XX/XX)	<b>Age of children</b>	↓ For Office Use Only ↓	
1.						
2.						
3.						
4.						
5.						

**PLEASE READ:** An employee's spouse or dependent child(ren) shall receive a Transit Pass as outlined in the applicable policy or collective bargaining agreement. If attending an accredited institution of higher education located within the service boundaries of the District – a current transcript **issued by the institution (no printed from the internet)** is required as proof of attendance (**please attach**). For purposes of interpreting the Dependent provision, "dependent children" shall also include children over whom the employee has been designated legal guardian **and** who are living with the employee **and** dependent upon his/her household for support – legal, signed & dated **documentation is required (please attach court documents)**. Please attach a copy of your *California Declaration of Domestic Partnership* form for all Domestic Partner requests.

I have been employed by Sacramento Regional Transit District (SRTD) **over 15 days** and I hereby certify under penalty of perjury that the dependent(s) listed above are living with me and totally dependent upon me for support. I understand that I must provide verification (as outlined above) of eligibility, **on an annual basis**, for my dependent(s) who have reached the age of 18 years in order to continue to receive a dependent transit pass. All Dependent passes are property of SRTD and shall be surrendered to SRTD upon request.

<b>EMPLOYEE SIGNATURE</b> <i>(read both statements above before signing)</i>	<b>DATE</b>
↓ FOR OFFICE USE ONLY ↓	

<b>AUTHORIZED BY SIGNATURE</b> (Human Resources Personnel)	<b>DATE</b>
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<b>PHOTO ID REPRESENTATIVE SIGNATURE</b>	<b>DATE</b>
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**REMARKS:**

Retired Employee Pass Expiration Date:     N/A