

Bus Pass Application

Date _____ Employee City ID# _____

Employee Name _____ Work Location _____

Current Street Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Answer a few questions:

1. How do you typically get to work? (circle one)

Carpool Bus Drive Bike Walk Other: _____

2. If you drive to work, where do you park? _____

3. Have you ever ridden the bus before? yes no

4. If yes, where does the KAT bus pick you up? _____

5. Does your route require a transfer? yes no

Initial next to each statement:

_____ I understand that the 20 ride pass is for my own personal use only.
I will not share my ride pass with anyone else.

_____ I understand that I am issued one 20 ride pass per month. If I use
all twenty rides before the month ends, I have to wait until the next month
to receive a new 20 ride pass.

_____ I understand that I am responsible for my 20 ride pass. If I lose it,
it cannot be replaced.

Employee Signature