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2014-15 COMMUTE CLUB / VANPOOL PERMIT APPLICATION

TO AVOID DELAYS IN PROCESSING YOUR PERMIT, PLEASE FILL OUT THIS APPLICATION COMPLETELY.

NAME OF VANPOOL:

TOTAL NUMBER OF SEATS IN VAN: ______ TYPICAL MONTHLY COST PER RIDER: _____

Does your vanpool park on Stanford's main campus?

□No □Yes (Specify Location) □Sometimes (Specify Frequency and Location)

Frequency: _____

_____ Location: ___

VANPOOL MEMBERS (all members must complete this section)

In order to be considered an official Stanford vanpool, a vanpool must comprise at least 50 percent Stanford University employees, students, or Stanford Hospital employees. Please complete the information below* to help us determine your eligibility as a Stan-ford vanpool and your vanpool members' eligibility for Commute Club/Clean Air Cash. All eligible members will be enrolled in the Commute Club and Emergency Ride Home programs once the application is submitted and eligibility requirements are verified.

*For non-Stanford vanpool members, only their first and last name is required.

1 PRIMARY MEMB Name (Last name, First name)	${\sf ER}$ (all information is	CHECK ALL THAT APPLY: Vanpool membership: Affiliation: Hospital or Clinics employee, student, or postdoc Hospital or Clinics employee Bigible for Commute Club / Clean Air Cash (see page 3)				
Stanford ID #/Hospital file ID**	Daytime phone	License plate #	My work address:			
Email			I certify that all my information is true, Club (if applicable—see page 3), and I a			
Home address		SIGNATURE	DATE			
2 ADDITIONAL MEI Name (Last name, First name) Stanford ID #/Hospital file ID**	MBER (all informatio	CHECK ALL THAT APPLY: Vanpool membership:Full-timePart-time Affiliation:Stanford University employee, student, or postdoc Hospital or Clinics employeeNon-Stanford Eligible for Commute Club / Clean Air Cash (see page 3) My work address:				
Email		I certify that all my information is true, I am eligible for the Commut Club (if applicable—see page 3), and I accept the terms on Page 4.				
Home address			SIGNATURE	DATE		
3 ADDITIONAL MEI Name (Last name, First name) Stanford ID #/Hospital file ID**	MBER (all informatio	CHECK ALL THAT APPLY: Vanpool membership:Full-timePart-time Affiliation:Stanford University employee, student, or postdoc Hospital or Clinics employeeNon-Stanford Eligible for Commute Club / Clean Air Cash (see page 3) My work address:				
Email			I certify that all my information is true, I am eligible for the Comm Club (if applicable—see page 3), and I accept the terms on Page 4			
Home address			SIGNATURE	DATE		
4 ADDITIONAL MEI	MBER (all informatio	CHECK ALL THAT APPLY: Vanpool membership: Full-time Affiliation: Stanford University employee, student, or postdoc				
Stanford ID #/Hospital file ID**	Daytime phone	9	Affiliation: Stanford University employee, student, or posto Hospital or Clinics employee Non-Stanford Eligible for Commute Club / Clean Air Cash (see page 3) My work address:			
Email	I		I certify that all my information is true, Club (if applicable—see page 3), and I a			
Home address			SIGNATURE	DATE		

** not your badge number - your file ID number is on your timecard or paycheck stub.

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STANFORD UNIVERSITY PARKING & TRANSPORTATION SERVICES

STANFORD UNIVERSITY P&TS

2014-15 COMMUTE CLUB / VANPOOL PERMIT APPLICATION

5 ADDITIONAL MEMB	ER (all information is required)		CHECK ALL THAT APPLY: Vanpool membership: Full-time Part-time					
Name (Last name, First name)		Affiliation: Stanford University	Affiliation: Stanford University employee, student, or postdoc					
		Hospital or Clinics e						
Stanford ID #/Hospital file ID**	Daytime phone	My work address:						
Email	L	I certify that all my information is	true, I am eligible for the Commute					
		Club (if applicable—see page 3), a	nd I accept the terms on Page 4.					
Home address								
		SIGNATURE	DATE					
		SIGNATORE	DAIL					
	ER (all information is required)	CHECK ALL THAT APPLY:						
6 ADDITIONAL MEMIE	ER (all information is required)	Vanpool membership: 🗖 Full-time						
Name (Last name, First name)		Affiliation: Stanford University	employee, student, or postdoc employee 🔲 Non-Stanford					
		Eligible for Commute Club / Cle						
Stanford ID #/Hospital file ID**	Daytime phone	My work address:						
Email			true, I am eligible for the Commute					
		Club (if applicable—see page 3), a	nd I accept the terms on Page 4.					
Home address								
		SIGNATURE	DATE					
	ER (all information is required)	CHECK ALL THAT APPLY:						
	ER (all information is required)	Vanpool membership: Full-time						
Name (Last name, First name)		Affiliation: Stanford University	employee, student, or postdoc employee 🔲 Non-Stanford					
		Eligible for Commute Club / Cle						
Stanford ID #/Hospital file ID**	Daytime phone	My work address:						
Email		I certify that all my information is	true, I am eligible for the Commute					
		Club (if applicable—see page 3), a	nd I accept the terms on Page 4.					
Home address								
		SIGNATURE	DATE					
		SIGNATORE	DAIL					
		CHECK ALL THAT APPLY:						
8 ADDITIONAL MEMB	ER (all information is required)	Vanpool membership: 🗖 Full-time						
Name (Last name, First name)		Affiliation: Stanford University	employee, student, or postdoc employee 🔲 Non-Stanford					
		Eligible for Commute Club / Cle						
Stanford ID #/Hospital file ID**	Daytime phone	My work address:						
Email		I certify that all my information is	true, I am eligible for the Commute					
		Club (if applicable—see page 3), a	nd I accept the terms on Page 4.					
Home address								
		SIGNATURE	DATE					
L		Giditatone	PAIL					
		CHECK ALL THAT APPLY:						
9 ADDITIONAL MEMI	BER (all information is required)	Vanpool membership: 🗖 Full-time						
Name (Last name, First name)		Affiliation: Stanford University	employee, student, or postdoc employee 🔲 Non-Stanford					
		Eligible for Commute Club / Cle						
Stanford ID #/Hospital file ID**	Daytime phone	My work address:						
Email			true, I am eligible for the Commute					
		Club (if applicable_see page 3), a						
Home address								
		SIGNATURE	DATE					
L		SIGNATORE	DAIL					

ANPOOL PERM

** not your badge number - your file ID number is on your timecard or paycheck stub.

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STANFORD UNIVERSITY PARKING & TRANSPORTATION SERVICES

STANFORD UNIVERSITY P&TS

2014-15 COMMUTE CLUB / VANPOOL PERMIT APPLICATION

10 ADDITIONAL MEMBIName (Last name, First name)	${\sf ER}$ (all information is required)	Affiliation: Stanford Univ	CHECK ALL THAT APPLY: Vanpool membership: Grillation: Stanford University employee, student, or postdoc Hospital or Clinics employee Non-Stanford Eligible for Commute Club / Clean Air Cash (see page 3)			
Stanford ID #/Hospital file ID**	Daytime phone	My work address:				
Email	I certify that all my information is true, I am eligible Club (if applicable—see page 3), and I accept the ter					
Home address	SIGNATURE DAT					
11 ADDITIONAL MEMBI	${\sf I\!R}$ (all information is required)	CHECK ALL THAT APPLY: Vanpool membership:	II-time			
Name (Last name, First name)		Hospital or Cl	rersity employee, student, or postdoc inics employee			
Stanford ID #/Hospital file ID**	Daytime phone	My work address:				
Email		I certify that all my information is true, I am eligible for the Cor Club (if applicable—see page 3), and I accept the terms on Pag				
Home address						
		SIGNATURE	DATE			

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ELIGIBILITY FOR COMMUTE CLUB/CLEAN AIR CASH

Each Commute Club member must meet ALL of the following criteria for the duration of the permit:

- □ I do not drive and park near campus as part of my alternative commute, nor do I park at the VA Hospital or at off-campus Stanford parking lots and property.
- I do not live in on-campus student housing, Kingscote Gardens, or Olmsted Staff Rental Housing.
- □ I am actively employed at Stanford's main campus, or I am a postdoc or registered student (students only qualify for registered quarters: minimum of 8 units for undergraduates and 6 units or TGR for graduate students).
- I will be commuting to Stanford for the duration of my Commute Club membership.
- □ I would be required to display a Stanford parking permit if I were to park at my place of work or study.
- □ I am not an evening- or night-shift employee.
- □ I will not use any Stanford parking permit except this vanpool permit and/or the following: daily scratchers, department service vehicle permits, and SH permits, if applicable, during the time I am registered as a Commute Club member.
- ☐ My primary commute is to Stanford's main campus.
- □ I am required to be at Stanford's main campus at least 20 hours per week during normal business hours. Check all that apply for this vanpool:
 - Campus Welch Road, only if the following statement applies: I do not have parking privileges at my worksite, or my worksite has its own permitting system approved for a Commute Club Pilot Program and I have not been issued any of those permits.
- □ I understand that if I intentionally give false information to obtain membership in the Commute Club, I may lose my privilege to receive any transportation benefits from Stanford University, and I may receive disciplinary action up to and including termination of employment or expulsion.

CLEAN AIR CASH (The following information is required for each vanpool member applying for the Commute Club/Clean Air Cash program)

Please check the months in which you are eligible to receive Clean Air Cash based on the eligibility criteria above. If your eligibility changes, you must inform P&TS or risk losing future Commute Club membership.

MEMBER	Sep '14	Oct '14	Nov '14	Dec '14	Jan '15	Feb '15	Mar '15	Apr '15	May '15	Jun '15	Jul '15	Aug '15
1												
2												
3												
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5												
6												
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8												
9												
10												
11												



2014-15 COMMUTE CLUB / VANPOOL PERMIT APPLICATION

EMERGENCY RIDE HOME

The Emergency Ride Home program assures alternative transportation users that they will not be stranded on campus in the event of an unexpected personal emergency. As a Commute Club vanpool member, you will be automatically registered for the program, and your registration will remain effective for the duration of your employment or enrollment at Stanford. Please visit our website at transportation.stanford.edu/erh for further details and restrictions.

Informed consent, waiver and release of liability. As a voluntary participant in the Emergency Ride Home (ERH) program, I understand that my participation does not in any manner imply that, on acceptance of a ride through ERH, I am acting in the course and scope of official Stanford business, nor does it establish an employer-employee or agency relationship between Stanford and the service provider.

I understand (in the event a rental car is needed) I will be required to provide current identification and a major credit card, which is needed for security reasons. I understand that my credit card will NOT be charged for the Emergency Ride Home, but I am responsible for the cost of gasoline and any incidental fees. I also understand that I will be responsible for all charges that are not pre-approved by P&TS and are not allowable according to the program restrictions. In addition, if I use a rental car, I must return it the following morning or pay the additional rental fees.

I assume full legal and medical responsibility for all costs and expenses including insurance risk of injury and loss, including death or serious bodily harm, and/or loss of property and income that may result from my participation in this program. I agree not to sue or bring claim against Stanford, its trustees, directors, officers, agents, or employees, by reason of any accident, illness, injury, loss, or death that is caused by or alleged to be caused by my participation in this program. The terms of this release shall serve as a release and assumption of risks for my heirs, executors, administrators, and for all of my family members.

ADDITIONAL INFORMATION

- Vanpool permits are only valid in designated vanpool spaces. Stanford vanpools have a reserved parking space on campus. If the vanpool van needs to be parked elsewhere on campus temporarily, use a daily parking scratcher or meter parking. If your designated space is no longer used or needs to be relocated, please contact our office at 650.723.9362.
- If your vanpool situation changes (a member leaves, a new member is added), please notify Parking & Transportation Services at commuteclub@stanford.edu.
- If you want to recruit new vanpool members, visit transportation.stanford.edu/ridematch to use our free online Ridematching Services. For further information, please call our office at 650.723.9362.