



National
Aeronautics and
Space
Administration

Application for Transit Benefit

PRIVACY ACT NOTICE

NASA Headquarters is soliciting this information in connection with its employee transit benefit program, authorized by Public Law No. 101-509, Section 629. This information is solicited under authority of the Privacy Act, 5 U.S.C. Section 552a. The purpose of this information is to facilitate timely processing of your request, to ascertain your eligibility, and to prevent misuse of the funds involved.

This information will be matched with other Federal agencies to ensure that you are not listed as a carpool participant or the holder of a motor vehicle parking permit at any of those agencies. The information you provide may also be shared with state, local, or other Federal, or Congressional offices which have a need to know in connection with program oversight or when relevant to civil, criminal, administrative proceeding. Information contained in this system of records may be disclosed in the course of presenting evidence or during pretrial discovery. NASA may disclose such information to the Department of Justice or other agencies in connection with such a proceeding.

Furnishing the information on this form is voluntary, however, not providing this information may result in NASA's inability to process and approve your application in an accurate and timely fashion. (Ref. "10PATS" system of records and its routine uses.)

NAME (Last, First, Middle Initial)	BADGE NUMBER
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HOME ADDRESS (Street, City, State, ZIP)

STATUS (Choose only one)
<input type="checkbox"/> CIVIL SERVANT <input type="checkbox"/> DETAILEE <input type="checkbox"/> STUDENT <input type="checkbox"/> TEMP <input type="checkbox"/> IPA

MODE OF TRANSPORTATION USED FOR COMMUTING (Choose only one) <input type="checkbox"/> METRO RAIL <input type="checkbox"/> METRO BUS <input type="checkbox"/> VANPOOL (Complete below) <input type="checkbox"/> VRE <input type="checkbox"/> MARC <input type="checkbox"/> COMMUTER BUS (Complete below)	OFFICE TELEPHONE NUMBER	OFFICE/SUITE
	MONTHLY COMMUTING COST	

COMMUTER BUS / VANPOOL INFORMATION (If your mode of transportation is a vanpool, please provide the following information)

NAME OF ASSOCIATION	TELEPHONE NUMBER	ADDRESS
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CERTIFICATION

I hereby certify that I am employed or detailed to NASA Headquarters and am not a member of a carpool or a holder of any other form of workplace motor vehicle parking permit. If I am currently a member of a NASA Headquarters carpool, I have filed an NHQ FORM 202, "Request for Change in Commuting Status." I, therefore, certify that I am eligible for a fare subsidy for use on participating public transportation systems, am obtaining it for my personal commuting use, and will not transfer it to anyone else. I will return any unused fare subsidy to the Transit Benefit Program Manager.

This certification concerns a matter within the jurisdiction of an agency of the United States and making a false, fictitious, or fraudulent certification may render the maker subject to criminal prosecution under Title 18, United States Code, Section 1001.

APPLICANT'S SIGNATURE	DATE
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FOR OFFICIAL USE ONLY

Application Received Date _____ Initial _____	<input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED
First Pickup Date _____ Initial _____	

NASA HEADQUARTERS PUBLIC TRANSIT SUBSIDY COORDINATOR'S SIGNATURE	DATE
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