

State of California

M E M O R A N D U M

To: PERSONNEL MANAGEMENT LIAISONS

Date: September 7, 1990  
Reference Code: 90-29

**THIS MEMORANDUM SHOULD BE DISTRIBUTED TO:**

Departmental Traffic Management Coordinators

From: Department of Personnel Administration

Subject: Evaluation of Transit Incentive Program


As you recall, Executive Order D-73-88 called upon the Department of Personnel Administration (DPA) to implement several measures to encourage State employees to use public transit and vanpools. One measure provided up to a maximum of \$15 towards the purchase of a monthly transit pass or tickets. The second measure provided \$50/month to vanpool drivers.

DPA has begun an evaluation of these programs to determine how these incentives have changed the commuting behavior of State employees. We are asking your assistance in the evaluation effort.

DPA issued an implementation memo for transit passes dated January 30, 1989. Attached to the memo was an Employee Commuter Survey Form, JENS297 (attached). DPA required departments to have all employees purchasing passes to complete this form. We are requesting that these forms be returned to DPA to help us in our evaluation of the program. These forms will be helpful in measuring the success of this program and will provide a basis for determining whether or not the program will be continued. The forms should be returned no later than **September 25, 1990** to:

Sydney Miguel  
Department of Personnel Administration  
Policy Development Office  
1515 S Street, North Building, Suite 400  
Sacramento, CA 94244-2340

We would appreciate your timely assistance in this matter. If you have any questions or desire additional information, please contact Sydney Miguel at (916) 324-9363 or ATSS 454-9363.

  
Wendell M. Coon, Chief  
Policy Development Office

Attachment

JENS776



EMPLOYEE COMMUTER SURVEY

Collective Bargaining Designation (CBID)

_____	_____
_____	Employee Name
_____	_____
Department/Address	_____
	_____
	Home Address

Distance traveled \_\_\_\_\_  
(from home to work, one way)

Frequency of commute:  
(each month)

- 15-20 days/month
- 10-14 days/month
- less than 10 days/month

Method of commute:

- Light Rail/BART
- Bus
- Ferry
- Train (e.g., Caltrain)
- Other \_\_\_\_\_

I have been commuting on public transit since \_\_\_\_\_.

I certify that my responses to this form are true and correct. I also certify that I am the sole recipient of this pass/token. I further understand that I will be obligated to return any improperly received discount payment and that any purposeful misuse of this program is cause for disciplinary action.

\_\_\_\_\_  
Signature Date

**For office use only:**

Record of Purchaser

<u>Commuting Period</u>	<u>Type/amount of ticket/token purchased</u>	<u>Date</u>	<u>Employee Signature</u>
03/89			
04/89			
05/89			
06/89			
07/89			
08/89			
09/89			
10/89			
11/89			
12/89			
01/90			
02/90			
03/90			