



Parking & Transportation
 (703)993-2828 fax (703)993-8575

Commonwealth Commuter Choice Tracking Form

MONTH OF PARTICIPATION

Please complete in ink.

FIRST NAME

LAST NAME

G NUMBER

E-MAIL

SUPERVISOR'S NAME & EXTENSION

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WORK PHONE

- Utilizing the chart below, indicate how you *arrived to campus*. Fill in the chart completely, no days should be left blank. Return this form by the fifth working day of the following month. If late, "Commuter Rewards" cannot be distributed.
- (Carpoolers) Monthly tracking forms with a minimum participation of 2 times per week must be submitted to maintain supplemental carpool permit eligibility.
- You must average two days a week using alternative methods (other than driving alone) to be eligible for two free daily general lot permits per month (if you don't own a permit). If you have a permit, you will be issued two all day garage validations per month instead.
- For complete policies and procedures visit transportation.gmu.edu

Mode Chart	<p>A) Compressed Work Day B) Bicycle C) Carpool - Indicate the # of carpoolers in your carpool, e.g. C2, C3, ... D) Drove Alone E) Telecommute W) Walk VP) Vanpool CUE) CUE bus GMU) Shuttle bus R) Remote Work S) Sick Day K) Dropped off V) Vacation/other paid leave U) Unscheduled Day M) Metro Bus or Metro Rail</p> <p>Example for tracking</p> <p>Commuting Days: 1 C-2 2 W 3 S 4 GMU</p>
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SUN	MON	TUES	WED	THURS	FRI	SAT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

LIST ALL CARPOOL PARTNERS

PLEASE LIST ANY CHANGES FROM THE PRIOR MONTH (ADDRESS, WORK LOCATION, WORK HRS, PERMIT PURCHASE/TURNED IN)

SIGNATURE _____

DATE _____

My signature verifies that the information I have provided on this document is true and complete to the best of my knowledge. I have read the Commuter Choice program policies and procedures and agree to the terms. I understand that falsification of any information on my monthly tracking form will result in program disqualification.

On-line tracking form available at: <http://transportation.gmu.edu/>

Rev. 10/11

Fax form to Parking & Transportation Dept. at 703 993-8575 or send in Interoffice Mail to 1J6. Thanks

