



**Transit Riders Advisory Committee (TRAC)  
Member Application 2019**

The Transit Riders Advisory Committee (TRAC) members use their collective knowledge and experience with PSTA’s services as well as their knowledge of community needs and values to provide insight and advice to the PSTA Board and its committees on specific programs and projects relating to transit service operations and planning efforts. Members are selected to represent a diverse cross-section of the community.

**Meeting Schedule**

The committee generally meets on the third Tuesday of the month from 4:00 p.m. to 5:30 p.m. in the 2<sup>nd</sup> floor auditorium at PSTA Headquarters, 3201 Scherer Drive, St. Petersburg, one day prior to the regularly scheduled Board Planning Committee.

**Applicant First Name** \_\_\_\_\_ **Last Name** \_\_\_\_\_

Street Address \_\_\_\_\_ Unit # \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

Are you currently employed?  Yes  No  Retired      Occupation/Employer \_\_\_\_\_

Are you a student?  Yes  No      Name of School \_\_\_\_\_

What bus route(s) do you ride? \_\_\_\_\_      How often do you ride? \_\_\_\_\_

Which committee seat do you believe you are qualified to fill? (check all that apply)

- North County
- Mid-County
- South County
- Beach Community
- DART Client
- Student
- Business Professional

**Statement of Interest** *(This section must be completed to be considered)*

On a separate sheet of paper, please describe the experience and/or accomplishments, either paid or volunteer, that you would bring to this committee. Why do you want to be a member of this committee? *Limit your response to 500 words.*

**Demographic Information** (Optional)

Age \_\_\_\_\_ Ethnic Origin \_\_\_\_\_

Male  Female      Disability (if applicable) \_\_\_\_\_

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*(Required)*

Submit to: PSTA Planning Dept./TRAC, 3201 Scherer Dr., St. Petersburg, FL 33716 or email to [engage@psta.net](mailto:engage@psta.net)