



VERY IMPORTANT - DO NOT MAIL
 You must bring this completed Information Sheet and valid photo identification to your Transit Evaluation appointment.

TRANSIT EVALUATION INFORMATION SHEET

After completing this Information Sheet, call Access Customer Service Center to schedule your in-person Transit Evaluation at **1-800-827-0829, TDD 1-800-827-1359.**

1. PERSONAL INFORMATION – please print clearly

Last name _____ first _____ middle initial _____

Female Male Social security number (optional): _____

Date of birth (optional) ____ / ____ / ____

Home Address

street _____ city _____ state ____ zip _____

telephone (____) _____ TDD Yes No

Mailing Address (If different from home address)

street: _____ city: _____ state: ____ zip: _____

Emergency Contact

Name: _____ Daytime phone: (____) _____

Evening phone: (____) _____

Do you require information in an alternate format? Yes No

If yes, please indicate: Audio Braille Diskette Large Print

Your primary language: English Spanish Other _____

2. MOBILITY INFORMATION please print clearly

What is your disability? _____

Which of the following mobility aids or equipment do you use?

- | | | |
|---|--|---|
| <input type="checkbox"/> Power Wheelchair | <input type="checkbox"/> Manual Wheelchair | <input type="checkbox"/> Scooter |
| <input type="checkbox"/> Crutches | <input type="checkbox"/> Walker | <input type="checkbox"/> Service Animal |
| <input type="checkbox"/> Cane | <input type="checkbox"/> Braces | <input type="checkbox"/> Other: _____ |