



**Summary Continued;**

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**Your Summary will be evaluated on your ability to work and train all of WHEELS passengers.**

**Please complete all of the sections below. Please circle the answers;**

**1.) Do you ride WHEELS fixed route bus system? Yes No**

**2.) Have you ridden on some or all of our routes? Some All**

**3.) Are you a regular rider? Yes No**

**4.) Do you also take transportation outside of the Tri-Valley? Yes No**

**5.) Do you ride BART? Yes No**

**6.) Do you ride ACE? Yes No**

**7.) How well do you think you know the WHEELS system?**

**Extremely Well      Well      Ok      Learning it      Not at all**

**Why do you see the importance of training people and to promote alternative transportation in the Tri-Valley?**

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**If you were asked to train someone who is elder or has a disability, would you have a problem training them?**

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**You will be required to complete 4 HOURS of class training and at least 4 HOURS of on board training. Additionally, you will observe our customer service department for 2 HOURS. Will there be a problem completing the training hours? (8am-5pm)**

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**If training fellow students, or students in general, would you be able keep them focused on the training?**

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**Would you have any trouble training 12 trainees over a 12 month period? Or, 1 per month.**

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**Would you be able to submit your training reports quarterly to WHEELS? (Every 3 months)**

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**Do you promise to travel on board our buses on a regular basis (free of charge with WHEELS AMBASSADOR YEARLY PASS), or at least 1 time per week?**

**Yes \_\_\_\_\_**

**No \_\_\_\_\_**

**Your signature indicates your commitment to our Ambassador Program. If selected, you will receive your training in May and your Certification when all training is completed. You will then receive your Yearly WHEELS AMBASSADOR PASS.**

**I, \_\_\_\_\_, the undersigned do affirm that the above statements are true and correct and that I acknowledge and accept the commitments imposed upon the position as a LAVTA Transit Ambassador.**

**Signature: \_\_\_\_\_**

**Date: \_\_\_\_\_**