



MARTA Riders' Advisory Council Application

Applications are due March 14, 2020

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

1. In what MARTA member jurisdiction do you live?

☐ City of Atlanta ☐ Clayton County ☐ DeKalb County ☐ Fulton County ☐ N/A

2. How often do you use MARTA?

☐ Daily ☐ Weekdays only ☐ Weekends only ☐ Special Events/Holidays only ☐ Never

3. Which mode of service do you use most? (Choose one)

☐ Bus ☐ Rail ☐ Streetcar ☐ Mobility

4. Which rail line(s) do you usually ride?

☐ Red ☐ Gold ☐ Blue ☐ Green ☐ N/A

5. Which MARTA bus route(s) do you ride?

6. Do you use any of the following regional services?

☐ Xpress ☐ CobbLinc ☐ Gwinnett County Transit ☐ None

7. Do you use MARTA to commute to:

☐ Work/school ☐ Personal business/medical ☐ Social/recreational ☐ Other

8. Is public transit your sole means of transportation?

☐ Yes ☐ No

9. Which best describes your race and/or ethnic background?

☐ American Indian/Alaska Native/Native American ☐ Asian ☐ Black/African American
☐ Hispanic/Latino ☐ Native Hawaiian/Pacific Islander ☐ White/Caucasian
☐ Prefer not to answer



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10. How old are you?

☐ 30 or younger ☐ 31-40 ☐ 42-52 ☐ 53-63 ☐ 64-74 ☐ 75 or older

11. What is your primary language?

12. What is your household's annual income range?

☐ Under \$25,000 ☐ \$25,000 to \$49,999 ☐ \$50,000 to \$74,999 ☐ \$75,000 to \$99,999
☐ \$100,000 to \$149,999 ☐ \$150,000 to \$199,999 ☐ \$200,000 or more ☐ Prefer not to answer

13. Which of the following best describes your highest level of education?

☐ Grade school or some high school ☐ High school graduate ☐ Business/technical school ☐ Some college
☐ College graduate ☐ Graduate degree ☐ Post graduate degree ☐ Prefer not to answer

14. Please describe how you, as a member of the Riders' Advisory Council (RAC), would solicit feedback from or share what you learn with fellow MARTA riders?

15. Please provide three personal or professional references including their telephone and email contact information.

Reference 1:

Full Name: _____
Last First M.I.

Phone: _____ Email: _____

Reference 2:

Full Name: _____
Last First M.I.

Phone: _____ Email: _____

Reference 3:

Full Name: _____
Last First M.I.

Phone: _____ Email: _____



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16. The RAC meets the first Wednesday of each month from 6:30pm – 8:30 pm. Can you meet at this time?

☐ Yes

☐ No

17. How did you learn about this opportunity?

18. Please provide a brief statement (500 words or less) outlining why you wish to serve on the Riders Advisory Council. Include your community involvement/volunteer activities.

DISCLOSURE:

MARTA will only utilize the individual information collected on this form to fill positions on the Riders' Advisory Council. Providing this information is voluntary, but an individual who does not submit a complete application, with the exception of the self-identification of your race, ethnicity and income, may not be considered as a candidate for membership on the Riders' Advisory Council. Except for the information regarding your race, ethnicity and income, information from this form will be disclosed as required for law enforcement purposes; and in compliance with the applicable laws. Selected information about Riders' Advisory Council members, excluding the information on race, ethnicity and income may be disclosed to the public. In order to comply with certain governmental record-keeping and reporting requirements for administration of civil rights laws and regulations that MARTA is subject to, we invite you to voluntarily self-identify your race, ethnicity, and income. Submission of this information is voluntary and refusal to provide it will have no bearing on your application. All such information will be kept strictly confidential.