



Participant Release of Data – (STUDENT)

Agreement

I, _____, understand that the _____ is
 (Student Name) LAUSD - Educational Services (Entity Name)
 paying for all or part of my transit benefit through the GO TAP Program. I understand that my TAP
 Card usage information is compiled by LACMTA and may be used by the
 LAUSD - Educational Services
 _____ to determine my eligibility for continued purchase /
 (Entity Name)
 subsidization of my transit benefit.

By accepting the TAP Card, I hereby grant LACMTA permission to release periodic reports of my TAP
 Card activity including date, time, and service used (bus route or rail station) to the
 LAUSD - Educational Services
 _____.
 (Entity Name)

I also agree to use the TAP Card in accordance with the terms of the TAP Cardholder Agreement for
 its intended business purpose only and not to damage or abuse it, and to not allow any other individual
 to use it.

Participant (STUDENT)

Date

Program Coordinator

Date