



TRPTA

TARGHEE REGIONAL PUBLIC TRANSPORTATION AUTHORITY

APPLICATION FOR PARATRANSIT SERVICE

ELIGIBILITY DETERMINATION PROCESS INSTRUCTIONS

DOCUMENT DATE

2/19/2013

PART 1 OF 2

Thank you for inquiring about eligibility for Paratransit Service. T.R.P.T.A. provides this service for people with physical, cognitive, or visual disabilities who are functionally unable to independently use T.R.P.T.A.'s Fixed Route Service either all of the time, temporarily, or under certain circumstances. The purpose of the eligibility application is not to determine the existence of a disability, but to determine if and how an individual is functionally able to use the Fixed Route Service.

This packet has 2 parts with 3 sections:

Section 1 contains information concerning the eligibility process and is kept by the Applicant for future reference. (Part 1)

Section 2 contains instructions on how to apply and what to expect during the Paratransit Eligibility Process. (Part 1)

Section 3 contains the actual application. This is submitted to the Paratransit Administrator with any additional documentation supporting the application. (Part 2)

This document is available in alternate formats.

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Table of Contents

SECTION 1 – Eligibility Process Information.....	4
Definitions:.....	4
T.R.P.T.A. Paratransit Services.....	4
Making Your Case	4
T.R.P.T.A. Staffing.....	5
Communication with Applicant.....	5
Eligibility Criteria	6
Visitor Paratransit Eligibility	8
Paratransit Service Identification Card.....	8
Feeder Service for Part of Trip	9
Other Sources of Information.....	9
Right to Appeal an Eligibility Decision.....	9
ADA/Civil Rights Contact Information	10
Section 2: Steps in the Paratransit Eligibility Process Checklist.....	12
Instructions for Paratransit Eligibility Process	14
Step 1: Contact Paratransit Administrator	14
Step 2: Prepare Application and Supporting Documentation for Application.....	14
Step 3: Turn in Completed Application.....	15
Step 4: Interview and/or Functional Assessment	16
Step 5: Bring Needed Help	16
Step 6: Eligibility Determination.....	17
SECTION 3 – PARATRANSIT SERVICE APPLICATION.....	18
Part 1 General Information and Contact Information:	18
Part 2 Questions about Using the Regular Fixed Route System	19
Part 3 Questions about Applicant’s Condition.....	21
Part 4 Current Travel Information	24
Part 5 Applicant’s Certification	25
Part 6 Medical Release of Information.....	26

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SECTION 1 – Eligibility Process Information For Paratransit Eligibility Determination

Definitions:

- ADA – Americans with Disability Act
- Applicant – Individual applying for a paratransit eligibility determination. If the Applicant is not physically or cognitively able to apply for the eligibility determination, then the Applicant’s legal guardian or person with a power of attorney for the Applicant shall act as the representative for the Applicant and is responsible for providing all required documentations and signing all forms for Release of Information.
- DOT – (Federal) Department of Transportation
- Feeder Service - Feeder Service is when the Rider is either taken to the nearest fixed route stop or picked-up at the nearest route stop by either the demand-response service or the paratransit service.
- Hearing Examiner – Person to whom Applicant applies for an Appeals Hearing if the Applicant’s application is denied.
- Paratransit Administrator – T.R.P.T.A. staff person working with the Applicant and determining the Applicant’s eligibility for paratransit service.

T.R.P.T.A. Paratransit Services

T.R.P.T.A. is committed to providing transportation services which can be used by all citizens. All of the T.R.P.T.A. fleet is equipped to ADA specifications, including wheel chair lifts. T.R.P.T.A. provides Paratransit Service to individuals whose disabilities prevent them from using Fixed Route Service. In Section 1, you will find information on the process of determining eligibility for Paratransit Service.

Making Your Case

Although T.R.P.T.A.’s staff will make every effort to reach a fair determination of an Applicant’s eligibility to qualify for the Paratransit Service, it remains the responsibility of the Applicant to assist in the assessment process by carefully documenting their disabling conditions and any specifically identifiable problems the Applicant experiences when trying to access the Fixed Route stops, or using the bus, or the bus service itself.

If the Applicant is denied Paratransit Eligibility, or is given a conditional status that the Applicant feels is inappropriate, or a trip is determined to be ineligible, the Applicant should appeal the decision in accordance with the Appeals Process. See “Right to Appeal an Eligibility Decision.”

T.R.P.T.A. Staffing

Paratransit Administrator:

This is the first contact person when requesting information regarding T.R.P.T.A.’s Paratransit Eligibility Program. The Paratransit Administrator will also assist the Applicant with the forms and documentation needed to support their request for Paratransit Eligibility Status. The Paratransit Administrator shall also make the initial determination regarding eligibility.

The Applicant should resubmit an Application for Eligibility any time the circumstances affecting the Applicant’s eligibility status change. This is true even if the Applicant is currently eligible for one type of paratransit service but the Applicant may now need a more liberal trip classification.

Hearing Examiner:

If an Applicant can demonstrate that the Paratransit Administrator has not reasonably considered all of the facts supporting their request for Paratransit Eligibility Status either in general or for a specific trip, then the Applicant has the right to submit a request for reconsideration to the Hearing Examiner.

Communication with Applicant

All written and verbal communication and notices shall be made with, or sent to, the Applicant UNLESS the Applicant has a legal guardian. If the Applicant has a legal guardian, then all written and verbal communication and notices shall be made with, or sent to, the legal guardian. The legal guardian may provide notarized, written instructions to T.R.P.T.A. with legal contact information other than the legal guardian.

Eligibility Criteria

Individuals may be classified as Paratransit Service eligible on the basis of either a temporary or permanent disability. **A diagnosis of a disability in and of itself does not establish eligibility.** What is needed is a determination of whether, as a practical matter, the individual can independently use the regular Fixed Route transit service.

The goal of the process to determine Paratransit Service eligibility is to ensure that only persons who meet the regulatory criteria are regarded as eligible for Paratransit Service. The ADA regulations provide that a person may be eligible for Paratransit services under one of the following three categories:

Category 1: Unconditional Eligibility for All Trips – Can't navigate the system independently.

Category 1 Eligibility includes those persons who are unable to use fully accessible fixed route bus services, such as: "Any individual with a disability who, as a result of a physical or mental impairment (including a vision impairment), and without the assistance of another individual (except the operator of a wheelchair lift or other boarding assistance device), is unable to independently navigate the Fixed Route system."

Examples include, but are not limited to, the following:

- An individual with cognitive disability, if he/she doesn't know where to get off the bus.
- A person with a vision disability who cannot travel in an unfamiliar location or cannot navigate complex transfers.
- A person whose lack of manual dexterity and lack of balance makes him/her unable to stand up and hang on, so she always needs a seat on the bus (since a seat cannot always be guaranteed on a Fixed Route bus).

Category 2: System Eligibility - Needs an Accessible Vehicle & an Accessible Stop & Route until the Route Bus and/or the Stop and/or the Route are fully accessible.

Category 2 Eligibility includes "Any person with a disability who could ride an accessible vehicle but the route is not accessible or the lift does not meet ADA standards or the lift is broken. Barriers must be under T.R.P.T.A.'s control."

Examples of Category 2 Eligibility would include:

- Driver fails to call out pre-determined stops or reference points on the route.
- Route bus was not compliant with ADA regulations such as the lift not working. Normally all T.R.P.T.A. buses are compliant with ADA regulations.

Category 3: Personal Conditional Eligibility - Obstacles Prevent Rider from Reaching Stop

Category 3 Eligibility includes “Any individual with a disability who has a specific impairment-related condition which prevents such individual from traveling to a specific boarding location or from a specific disembarking location and the barriers are not under T.R.P.T.A’s control.”

Obstacles which prevent a passenger from accessing a route stop include, but are not limited to the following examples:

- Physical health of passenger such as heart or respiratory or physical conditions such as a broken leg or medical inability to walk more than the walking distance to either an origin or destination stop.
- Lack of curb cuts on the route.
- Lack of sidewalks.
- Weather related conditions such as snow and/or ice.
- Specific barriers on specific routes, such as a hill that is too steep for the Rider to manage.

A physical condition may not limit a person from riding the route system for all trips, but paratransit eligibility might be reasonable for specific trips. For example, a rider might be able to ride the Route system to go shopping, but a specific doctor’s office might be half a mile from the stop and the rider’s heart condition might not allow the rider to walk that distance (conditional permanent). If the rider has two broken legs, then the eligibility might be conditional temporary.

Conditional Eligibility could be either permanent or temporary depending on the nature of the individual and/or the circumstances involving the origin and/or destination of the trip.

Eligibility Criteria **does not** include: Age, inconvenience, mild discomfort, financial status, or inability to drive.

Conditional Trips

All conditional trips will be considered on a trip by trip basis. The events which determine whether or not the Applicant is eligible for a trip on any given day, will be established at the time the Applicant's eligibility is determined and will be based on conditions unique to the Applicant.

For example, if the weather forecast predicts snow within 48 hours of a trip and the Applicant's disability does not allow them to use the Fixed Route Service when it snows, then the Applicant may call and schedule the Paratransit Service trip. However, if the weather forecast predicts warm, sunny weather without snow, Applicant would be expected to use the Fixed Route System and would not be able to schedule a trip.

Visitor Paratransit Eligibility

A person providing a paratransit eligibility identification card from any public transportation service following ADA Paratransit guidelines shall receive twenty one (21) days of non-consecutive service within any calendar year. If the Visitor requires additional service, they must apply for T.R.P.T.A Paratransit Service. The Visitor will be asked to produce photo identification with the paratransit identification card when using the Paratransit Service.

Visitors who do not have this kind of eligibility because they live in areas without public transit service **will be asked for documentation of their health condition or disability when scheduling a Paratransit trip.**

Paratransit Service Identification Card

If the Applicant's application is approved and eligibility classification status has been determined, then a picture identification card will be prepared showing the expiration date, if any, and any conditions which trigger a Paratransit service trip. It is the sole responsibility of the Applicant to resubmit an application a minimum of 60 days before the **eligibility expiration date** to ensure T.R.P.T.A. has adequate time to re-evaluate the new application and to issue a new identification card. Prompt re-application will help ensure there is not a break in Paratransit Service eligibility.

Feeder Service for Part of Trip

In an effort to provide service comparable to the Fixed Route Service, T.R.P.T.A. staff may suggest a combination of Demand-Response, Paratransit Service, and Fixed Route Service. It is important for the T.R.P.T.A. staff to know if the Applicant can wait for up to and including thirty (30) minutes by themselves at a sheltered stop (such as a store.) If the Applicant could ride the Fixed Route, but cannot wait by themselves due to the nature of their disability, the Applicant should be very specific in the answer to that question in Section 2, Part 2 “Questions about Using the Regular Fixed Route System.”

Other Sources of Information

Riders eligible for Paratransit Service are required to follow T.R.P.T.A.’s Policies and Procedures as described in T.R.P.T.A.’s “Rider’s Guide”. T.R.P.T.A.’s “Rider’s Guide” is therefore incorporated into this Route Service Application by reference. The “Rider’s Guide” may be obtained by contacting the Paratransit Administrator or by going to T.R.P.T.A.’s website: www.trpta.org.

Right to Appeal an Eligibility Decision

If after receiving decision on their initial application or recertification the Applicant feels the decision was made in error, the Applicant may file an appeal. The appeal must be filed **within sixty (60) days after the date the “Notice of Eligibility” was mailed**. The eligibility letter will state specifically the reasons for conditional eligibility or denial and will provide instructions for appealing the decision. Review the submitted documentation when considering the reason(s) given in the eligibility letter. Be sure to supplement the documentation if necessary and then address every reason for the conditional eligibility or denial during the appeal Hearing.

Paratransit Service is not provided during the Eligibility Process, including the Appeals Process for Eligibility Determination. However, if initial eligibility is not determined within twenty-one (21) days of the Paratransit Administrator receiving a complete application, including in person interview and/or functional assessment, then, starting on Day 22, Paratransit Service will be provided until the eligibility determination is reached.

ADA/Civil Rights Contact Information

Additional Civil Rights contact information:

- State of Idaho Civil Rights Contact:

Russ Rivera
P.O. Box 7129
Boise, ID 83707-8152
Telephone: **208-3348152**

- Federal Civil Rights Contact:

Director, FTA Office of Civil Rights,
East Building - 5th Floor, TCR,
1200 New Jersey Ave. SE,
Washington, D.C. 20590.

When contacting, include as many details as possible.

FTA ADA website: www.fta.dot.gov/civilrights/civil_rights_2360.html

FTA ADA complaint form:

www.fta.dot.gov/civilrights/ada/civil_rights_3889.html

FTA e-mail is: ada.assistance@fta.dot.gov.

- The local Center for Independent Living can be contacted at:

Life, Inc
250 S. Skyline, Suite 1
Idaho Falls, ID 83402

Telephone/TTY: **208-529-8610**
Fax: **208-529-6804**
E-mail: diane@idlife.org
www.idlife.org

- The local Protection and Advocacy agency for Idaho - can be contacted at:

Disability Rights Idaho
1246 Yellowstone Avenue, Suite A-3
Pocatello, Idaho 83201-4374

Telephone: **208-232-0922**
Fax: **208-232-0938**
Toll-free: **866-309-1589**

E-mail: info@disabilityrightsidaho.org
www.disabilityrightsidaho.org

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Section 2: Steps in the Paratransit Eligibility Process Checklist

- Step 1: Contact Paratransit Administrator**

- Step 2: Prepare Application and Supporting Documentation for Application**

- Step 3: Turn in Completed Application**

- Step 4: Schedule Interview and/or Functional Assessment**

- Step 5: Bring Needed Help to Interview**

- Step 6: Eligibility Determination**

Instructions Begin on Next Page

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Instructions for Paratransit Eligibility Process

Step 1: Contact Paratransit Administrator

Contact the Paratransit Administrator and request information concerning the Paratransit Service and the Paratransit Eligibility process.

Contact information is:

Alden Allen

Phone – (208) 529-1489, Ext. 120 E-mail – ada.trpta@gmail.com

Address: T.R.P.T.A.

Paratransit Administrator
1810 W. Broadway #7,
Idaho Falls, ID 83402

Step 2: Prepare Application and Supporting Documentation for Application

Filling Out the Application:

To be successful, the Applicant must accurately show that the Applicant is actually unable to ride the Fixed Route bus all or some of the time, not just that it is more difficult for the Applicant. The Applicant should include information on any secondary disabilities the Applicant may have, such as disorientation, fatigue, or difficulties with balance.

The Applicant should consider their potential travel throughout the entire bus system during all seasons, not just those in the Applicant's immediate neighborhood or those that the Applicant normally uses. For example, the Applicant may be able to get to the bus stop near their home, but not the one near their workplace or the movie theater, or near other future travel destinations. Think about the Applicant's ability to deal with the variety of environments the Applicant might face across town, as well as any variable conditions the Applicant may experience due to their disability.

Routes/Schedules and Maps:

In order to help the Applicant consider their travel as stated above, the Applicant should review the following when determining the answers to the questions in Section 2:

- Enclosed Fixed Route Service Schedule with Route Map and Paratransit Boundaries.

Application and Needed Documentation:

Documentation SHOULD include any or all of the following if the Applicant feels the documentation will support the Applicant's claim for paratransit service. The Paratransit

Administrator may request any information not provided by the Applicant. Failure to submit the requested information within the time requested may result in the Applicant's application being denied or delayed.

- **A completed and signed Section 2 of this Application.**
- **A detailed statement from a disability-service provider** (independent living specialist, rehabilitation counselor, travel trainer, employment-support specialist, etc.). The statement should explain how the disability or its symptoms/effects prevents Applicant from using the Fixed Route bus system..
- **A detailed statement from a medical professional** (physician, psychologist, therapist, etc.). Medical or disability-related information should explain how Applicant's disability or its symptoms/effects prevents Applicant from using the mainline system.
- **A detailed personal journal/log** that documents the impact of travel on Applicant's disability, health, energy, stamina, etc. Personal journals or logs should have supporting medical documentation.
- **A detailed listing of the access barriers** preventing Applicant from traveling to or from a bus stop. For example, no curb cuts, no sidewalks, extremely busy intersection with fast "walk/don't walk" cycle, no pedestrian signals, hilly terrain difficult to climb, and/or weather during portions of the year that makes negotiating the distance impossible for you, etc. Please provide specific addresses of barriers.
- **Information about other factors** that would prevent Applicant from riding the Fixed Route bus service. For example, personal assistance for helping the Applicant prepare for transportation service is only available to the Applicant at certain times, or "I could use the Fixed Route system if I had a power wheelchair or scooter," or travel training on how to use the routes.

Step 3: Turn in Completed Application

The completed application (Section 2) and supporting documentation should preferably be mailed to the Paratransit Administrator. However, if necessary, applications will also be accepted in person.

Mail or turn in completed application and supporting documentation to:

T.R.P.T.A.
Attention: Paratransit Administrator
1810 W. Broadway #7
Idaho Falls, ID 83402

Step 4: Interview and/or Functional Assessment

T.R.P.T.A. will request a personal interview to review the documentation with the Applicant. After a completed and signed application is received, the Paratransit Administrator will contact the Applicant and set a time for a personal interview. Transportation to and from the scheduled personal interview and/or functional assessment is provided free of charge.

The Paratransit Administrator may request a Functional Assessment in addition to the personal interview. The Functional Assessment is a process to help determine whether the Applicant has the ability to use the Fixed Route system, and, if so, under what circumstances. The Functional assessment may be done by the Paratransit Examiner and/or with the support of an Occupational Therapist and/or other qualified specialists.

Functional assessments are evaluations that assess physical, visual, or cognitive ability. The functional assessment may include a simulated trip to and from a bus, a simulated bus trip, boarding a bus, negotiating a curb or curb cut, crossing the street, etc. Skills evaluated may include balance, strength, coordination, range of motion, bus travel skills, community safety skills, and general orientation. Variables in the environment as well as the person's ability to perform the tasks required to use the bus may be considered. If a functional assessment is not assessing one of the Applicant's conditions, then it is the responsibility of the Applicant to mention it. T.R.P.T.A. will pay the cost of the initial functional assessment.

Any additional functional assessments requested by the Applicant for any Hearing to reconsider the status of the Applicant's application, will be at the expense of the Applicant.

Step 5: Bring Needed Help

Every Applicant may bring an advocate familiar with their disability to any interview, assessment, or hearing. The advocate could be a friend, family member, advocate, service provider, lawyer, therapist, etc. The Applicant should discuss how the advocate will help them with the Paratransit Administrator before the Applicant arrives for any personal interview and/or functional assessment. If the Applicant needs help finding an advocate, the Applicant may be able to get assistance from a Center for Independent Living or other disability service agencies.

Step 6: Eligibility Determination

Thank you for submitting your application for ADA Reduced Fare/Paratransit Service. Eligibility for these services will be determined within **twenty-one (21)** days after the Applicant's application is completed. A complete application includes the Eligibility Determination Application form, Personal Interview, Medical Verification, and any Functional Assessment, if needed.

T.R.P.T.A.'s inability to verify Applicant's disability and to what extent the disability prevents Applicant from using the Fixed Route Service may result in a denial of eligibility.

The Paratransit Administrator will contact the Applicant or the Applicant's Legal Guardian by mail with the determination, as stated above in Communication with Applicant. If found eligible, there are three categories of eligibility that Applicant might be assigned to:

- 1. Unconditional:** Individual is not able to use accessible Fixed Route transit service under any circumstances and is eligible for all trips on the Paratransit Service.
- 2. Conditional:** Individual is able to use accessible Fixed Route transit service some of the time, but is prevented from using the Fixed Route under certain circumstances or for certain trips. Some trips are eligible for Paratransit Service, according to conditions tailored to the individual.
- 3. Temporary:** Individual is not able to use accessible Fixed Route transit service at this time; however, the condition or circumstance(s) leading to eligibility is reasonably expected to improve in the foreseeable future.

If Applicant has not received an eligibility decision within twenty-one (21) days from complete application, Applicant can access the Paratransit Service until a decision is made.

PART 2 OF 2

SECTION 3 – Paratransit Eligibility Application

PAGE 18 THROUGH PAGE 26 MUST BE SUBMITTED TO PARATRANSIT ADMINISTRATOR WITH ANY ADDITIONAL DOCUMENTATION.

The personal health information requested in this application will be used only to assess the applicant's functional ability, not determine disability. T.R.P.T.A.'s inability to verify disability or the extent to which it prevents access to the Fixed Route system may cause denial of eligibility. This information will be confidential and will not be shared with anyone outside of the eligibility determination process.

T.R.P.T.A. MAY SUBMIT A COPY OF THE SIGNED APPLICATION MAY TO THE HEALTH PROVIDERS AND AGENCIES IDENTIFIED IN THIS APPLICATION IN ORDER TO ASSIST THEM IN VERIFYING APPLICANT'S ABILITY TO USE THE FIXED ROUTE SYSTEM.

Part 1 General Information and Contact Information:

Applicant's Printed Name: _____

Applicant's Date of Birth: _____

Applicant's Contact Phone Number: _____

Applicant's Resident Address: _____

Printed Name of Person Preparing Form if Different from Applicant:

Preparer's Contact Phone Number: _____

Preparer's Resident Address: _____

Relationship of Preparer to Applicant: _____

Yes No. Does the Applicant require a Legal Guardian?

If "Yes", provide the printed name of the Legal Guardian: _____

Legal Guardian's contact phone number: _____

Legal Guardian's resident address: _____

Legal Guardian's relationship to Applicant: _____

Yes No Is English Applicant's primary language? If no, which: _____

Yes No Does Applicant need this application/further communication in an alternate format?

Check which format: Braille Large Print Computer Disk

The individual named as Applicant is applying for ADA qualified paratransit service on T.R.P.T.A.'s Paratransit Service. The answers to the following questions will assist T.R.P.T.A. staff in making a correct determination for the Applicant based on the American's with Disabilities Act (ADA) regulations. Because the Paratransit Service is a shared ride service in the same manner as the regular Fixed Route bus service, fear of being around people/crowds, the potential for crime, fear of darkness, etc., are not qualifying factors under the ADA.

It is important that all parts of this application are completed. An incomplete application will be returned to Applicant.

Part 2 Questions about Using the Regular Fixed Route System

Yes No Can you ride the Fixed Route bus without someone else's help?

Yes No Has the Applicant ever used the regular Fixed Route Buses?

If yes, please answer the following:

Yes, I typically use the fixed route buses ____ times a week.

Yes I used to, but stopped because (please be specific):

Is there something that might help Applicant ride the regular Fixed Route bus? Check all that apply.

Yes, route and schedule information. Yes, help in learning how to use the bus.

Yes, bus stops close to home. Yes, bus stops close to where I am going.

Yes, a communication aid. Yes, Describe: _____

No.

Yes No Can the Applicant ask for and follow oral instructions on how to use the Fixed Routes? If no, explain why not: _____

Yes No Can the Applicant ask for and follow written instructions on how to use the Fixed Routes? If "No", explain why not: _____

Please identify any and all physical barriers that prevent Applicant from using a Fixed Route Bus system:

Cannot get to Bus Stops or other places without curb cuts

Cannot get up steep sidewalks or streets

Cannot cross busy streets and intersections because _____

Cannot travel outside when weather is hotter than ____ degrees Fahrenheit

Cannot travel outside when weather is colder than ____ degrees Fahrenheit

Cannot find way because of vision problems

Get confused easily and then cannot find my way

Path to Bus Stop or destination does not have a sidewalk

Cannot get through snow on sidewalks or streets

Other: _____

Yes No Can the Applicant remain alone at a sheltered transfer point and wait the arrival of the Fixed Route Bus? If No, please explain why the Applicant cannot remain alone: _____

Yes No Has the Applicant received travel training before? If yes, please explain further: _____

Yes No Is the Applicant interested in receiving **free** travel training to help them access the Fixed Route System?

Part 3 Questions about Applicant's Condition

Identify the condition(s) the Applicant feels qualifies the Applicant for Paratransit Service. Please be sure and sign the "RELEASE FORM FOR MEDICAL OR REHABILITATION FACILITY/AGENCY" form found in Part 6.

Attach additional pages to explain if necessary.

Name of 1st Condition: _____

Explain how the condition affects Applicant's ability to use the Fixed Route system:

Is this condition: Permanent Temporary Episodic

Name of 2nd Condition: _____

Explain how the condition affects Applicant's ability to use the Fixed Route system:

Is this condition: Permanent Temporary Episodic

Yes No Does the Applicant require the use of portable oxygen?

Yes No Does the Applicant's disability affect cognitive functions? If "Yes" please explain:

Yes No Is the Applicant easily agitated and does the Applicant demonstrate hostile or aggressive behavior toward others with agitated. If "Yes" please explain.

If Applicant has had a psychological evaluation in the past three years that would affect the Applicant's ability to access or use the Fixed Route service, please include a copy with the Application.

Yes No Can the Applicant board a bus using either the bus steps with some assistance from the driver or by using the wheelchair lift, even if the Applicant is otherwise able to walk?

Yes No Does the Applicant use a mobility device?

Wheelchair Scooter Walker Other: Specify type_____

If applicable, how far is the Applicant able to use their mobility device without assistance from another individual? Equivalent to length of:

9 blocks 6 blocks 3 blocks 2 blocks 1 block

Other (Please specify estimated distance) _____

FOR PURPOSES OF SAFETY, T.R.P.T.A. RESERVES THE RIGHT TO REQUEST VERIFICATION THE COMBINED WEIGHT OF THE APPLICANT PLUS THE WEIGHT OF THE APPLICANT'S MOBILITY DEVICE ARE WITHIN THE ORIGINAL EQUIPMENT MANUFACTURER'S IDENTIFIED WEIGHT LIMITATIONS. T.R.P.T.A. LIFT LIMIT IS 800 LBS. MAXIMUM.

Please provide weight of wheelchair Applicant will use during transit service: _____ pounds. This weight must be verified by providing information from the wheelchair's original equipment manufacturer.

Please provide the current weight of the Applicant if over 250 pounds: _____ pounds. T.R.P.T.A. may request verification from the Applicant's personnel health provider.

Yes No Is the mobility aid greater than 33 inches wide or 54 inches long?
Specify Dimensions:_____

Yes No Does the Applicant have a Personal Care Assistant (PCA)? Please describe services provided by PCA to Applicant:

Yes No Does the Applicant require a service animal? Identify type of animal_____

Yes No Is Applicant physically and cognitively capable of waiting up to 30 minutes at a Bus Stop? If No, explain the limitation: _____

Yes No Is walking a detriment to the Applicant's condition? If "Yes" please explain:

If walking is NOT detrimental to the Applicant's condition, how far can the Applicant travel doing a combination of walking and standing? Please identify maximum distance. Equivalent to length of:

9 blocks 6 blocks 3 blocks 2 blocks 1 block

Other (Please specify estimated distance): _____

Yes No Is the Applicant able to determine where and when to get off the bus when riding alone? If No, please check the following that apply:

Applicant gets confused easily.

Applicant cannot remember where the Applicant is going.

Applicant needs someone to make sure Applicant gets to the stop.

Applicant needs someone to help Applicant transfer to another bus.

Only if Applicant can request Driver to call out Applicant's stop

Applicant could with travel training.

Other ways Applicant might be able to use Fixed Route System:

Yes No Does the Applicant have the manual dexterity to manage Fare coins and calculate the correct amount of the fare or use tokens or a punch card?

Yes No Can the Applicant tell time?

Yes No Does the Applicant have any problems with ____ Hearing? ____ Vision?

If Yes, please explain the Applicant's abilities and limitations.

Yes No Are there any other conditions that limit the Applicant's ability to use the regular

Fixed Route buses? If "Yes" then please describe them below:

Part 4 Current Travel Information

Please list five (5) one-way trips that the Applicant plans to make the most frequently using the Shuttle service. In the column – One Way Trips/Week – give the number of times the Applicant will be making that trip each week. Give street address. Please DO NOT list the return trip and DO NOT just say "home" or Dr. Smith's.

Sample

One Way Trips/Week	Regular Appointment Time	Original Pick-Up Address	Time Available for Pick-Up for Return Trip	Destination Address
3	9:00 a.m.	1810 W. Broadway, Idaho Falls, ID	3:30 p.m.	1515 East Curtis, Ammon ID

Applicant's Travel Information

One Way Trips/Week	Regular Appointment Time	Original Pick-Up Address	Time Available for Pick-Up for Return Trip	Destination Address

Part 6 Medical Release of Information

**RELEASE FORM FOR MEDICAL OR REHABILITATION FACILITY/AGENCY
For Eligibility Verification on Behalf of
Targhee Regional Public Transportation Authority
Idaho Falls, ID 83402**

Printed Name of Applicant _____
DOB _____

Applicant received service from the following doctor(s), rehabilitation facility, health care professional(s) or agency and said individuals or agencies are familiar with my case file. T.R.P.T.A. staff has my permission to contact any or all of the following references for medical or personal information that is relevant to supporting my (Applicant's) application for Paratransit Service.

Reference name and contact information of health care or rehab professional familiar with the above named Applicant.

- a. Name _____
- b. Agency _____
- c. Address _____
- d. Telephone: _____ Fax: _____

2. Name _____
- a. Agency _____
 - b. Address _____
 - c. Telephone: _____ Fax: _____

3. Name _____
- a. Agency _____
 - b. Address _____
 - c. Telephone: _____ Fax: _____

I, the Applicant, understand that this information will be held in the strictest of confidence by the T.R.P.T.A. staff and will not be shared with any other person or agency, except professionals involved in my eligibility determination. This form will permit the professionals listed to release information to T.R.P.T.A. UP TO 60 DAYS FROM THE DATE LISTED BELOW.

I further understand that I can revoke this consent at any time by providing written notification of revocation to T.R.P.T.A.

Signature of Applicant

Date

Signature of Party Signing for Applicant*

Date