

# 2017 GROUP AGREEMENT & SCHEDULE

County Vehicle Program – Commuter Services, Human Resources Department

I. Work Location(s): \_\_\_\_\_

Work Hours: \_\_\_\_\_

On \_\_\_/\_\_\_/\_\_\_ we, the team members in County Vehicle (CVxxx) \_\_\_\_\_, agreed to the following time schedule:

## MORNING

II. Pick-up location(s):	Arrival	Departure
1. _____	_____ a.m.	_____ a.m.
2. _____	_____ a.m.	_____ a.m.
3. _____	_____ a.m.	_____ a.m.

## AFTERNOON

III. Pick-up location(s):	Arrival	Departure
1. _____	_____ p.m.	_____ p.m.
2. _____	_____ p.m.	_____ p.m.
3. _____	_____ p.m.	_____ p.m.

IV. Each participant in the group who is authorized to drive must participate in the driving rotation in fairness to all members of the County Vehicle group, unless the group has unanimously agreed to a different arrangement. If there is a medical or legal reason a participant cannot drive, please notify the Rideshare Office in writing immediately. Your signature below accepts the agreed-upon driving responsibility arrangement.

V. Member Approval: *(Signature required from each registered team member; add additional copy of group agreement if there are more than 8 participants in the group)*

1. _____	5. _____
2. _____	6. _____
3. _____	7. _____
4. _____	8. _____

VI. Main Contact Person (Captain): \_\_\_\_\_

Work Telephone Number: \_\_\_\_\_

Address where vehicle is housed in the evening: \_\_\_\_\_

**Complete and Return to Commuter Services at Mail Stop #1008 OR FAX to 951-955-1181.**