

**2009**  
**STEVENS INSTITUTE OF TECHNOLOGY**  
**TRANSITCARD ENROLLMENT FORM**

NAME \_\_\_\_\_  
PLEASE PRINT

SS# \_\_\_\_\_

DEPARTMENT \_\_\_\_\_

I elect to enroll in the TransitCard program. I authorize Stevens Institute of Technology to deduct a total of \$\_\_\_\_\_ **for each quarter** of the calendar year from my check on a before tax basis. The maximum monthly amount allowed by law before taxes is \$230.00. Stevens Institute is authorized to continue the same amount for subsequent remaining quarters for the calendar year unless I notify the Human Resources Office in writing that I elect to change the amount prior to the beginning of the next quarter period in this calendar year.

I understand that once I authorize the amount for the quarter of the calendar year I cannot request a refund and agree to reimburse Stevens Institute of Technology for any unpaid vouchers at the time of my departure (termination) from the Institute from my last salary payment.

I agree to pick up my TransitCards in the Office of Human Resources (once a quarter) or provide written authorization to have the TransitCards distributed to my designee.

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

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**For Human Resources Office Only**  
**Disbursement Information**

Card No.

1<sup>st</sup> Qtr. \_\_\_\_\_ Date \_\_\_\_\_ Amt. \_\_\_\_\_ Received By \_\_\_\_\_

2<sup>nd</sup> Qtr. \_\_\_\_\_ Date \_\_\_\_\_ Amt. \_\_\_\_\_ Received By \_\_\_\_\_

3<sup>rd</sup> Qtr. \_\_\_\_\_ Date \_\_\_\_\_ Amt. \_\_\_\_\_ Received By \_\_\_\_\_

4<sup>th</sup> Qtr. \_\_\_\_\_ Date \_\_\_\_\_ Amt. \_\_\_\_\_ Received By \_\_\_\_\_