



**Metro**

Los Angeles County  
Metropolitan Transportation Authority

One Gateway Plaza  
Los Angeles, CA 90012-2952

213.922.2000 Tel  
metro.net

**ATTACHMENT C – REVISED APPLICATION**

**Transit Public Safety Advisory Committee  
(PSAC)**

**Membership Application**

Thank you for your interest in Metro’s **Transit Public Safety Advisory Committee (PSAC)**. We are looking for individuals who regularly ride Metro’s system, and who are committed to ensuring that Metro follows best practices for providing a service by which its customers feel and are safe **consistent with Metro's Public Safety Mission Statement to “safeguard the transit community by taking a holistic, equitable, and welcoming approach to public safety. Metro recognizes that each individual is entitled to a safe, dignified, and human experience”** Advisory Committee members should bring relevant knowledge **as riders or** ~~and expertise~~ **experts** ~~as residents, advocates for~~ **in** racial justice, **equitable transit,** ~~and/or~~ public safety reform, law enforcement ~~experts,~~ **victim’s rights,** mental health ~~providers or experts,~~ **homelessness,** and/or social services ~~providers or experts.~~ **Metro is particularly seeking to ensure that the perspectives of youth, women, seniors and those with disabilities are represented.**

The Committee will help facilitate a community-based approach to public safety on Metro’s transit system. *Please note, members serving on the PSAC are not required to be U.S. citizens.*

We appreciate your willingness to give of your time and expertise to this important work and thank you for being a part of the movement to continually ensure that Metro provides a world-class transportation for all.

*The following voluntary information is requested for the LACMTA Transit Public Safety Advisory Committee application process only. This information is not collected for any employment purpose and will be confidential and maintained in compliance with applicable California law.*

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_



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**1. Which of the following best describes you? Check all that apply.**

**Ethnicity:**

- Asian/Pacific Islander
- Black/African American
- Caucasian
- Hispanic/Latinx
- Native American
- Other

**Age:**

- 16-24
- 25-39
- 40-60
- 60+

**Gender:**

- Male
- Female
- Non-binary

**Annual Income:**

- Less than \$30,000
- \$30,000 to \$60,000
- More than \$60,000

**Housing Status:**

- Homeowner
- Unhoused
- Renter
- Other

**Are you a person with a disability(s)?**

- Yes
- No

**Sexual Orientation:**

- Heterosexual or straight
- Gay or lesbian
- Bisexual
- Other
- Decline to State



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**2. Are you affiliated with any organizations?**

No       Yes, please provide name: \_\_\_\_\_

**3. ~~In 2019~~, on average, how often ~~did~~ do you ride Metro buses or trains?**

- |   |   |
|---|---|
| <input type="checkbox"/> Every day or most days | <input type="checkbox"/> A few times per year |
| <input type="checkbox"/> At least once a week   | <input type="checkbox"/> Once a year or less  |
| <input type="checkbox"/> At least once a month  | <input type="checkbox"/> Never                |

**If you do ride, which lines do you ride most often?**

**4. Do you have any relationships (professional, financial, or otherwise) that may present a potential conflict of interest in working with Metro or the Public Safety Advisory Committee?**

**5. Experience and Interest**

**a. Please select the area(s) of interest or experience.**

- |   |   |
|---|---|
| <input type="checkbox"/> <u>Seniors</u>             | <input type="checkbox"/> Racial justice     |
| <input type="checkbox"/> <u>Youth</u>               | <input type="checkbox"/> Social services    |
| <input type="checkbox"/> <u>Mental Health</u>       | <input type="checkbox"/> Homelessness       |
| <input type="checkbox"/> Law enforcement            | <input type="checkbox"/> <u>Women &amp;</u> |
| Public safety                                       | <u>Girls</u>                                |
| Public transit and/or Equitable transit             | <u>Accessibility</u>                        |
| Primary Transit User (Transit Dependent or Carless) | Other: _____                                |



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**b. Describe the experience, knowledge, technical skills, and/or education, professional or otherwise which you possess regarding the area(s) selected above. Please feel free to attach a resume.**

**6. Are you a current or former member of any other Metro advisory committees? If yes, please describe:**

**7. Please state your reason(s) for applying to the Public Safety Advisory Committee.**

**8. How can you contribute to the mission of the Public Safety Advisory Committee?**



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9. What are your top goals for your tenure on the Public Safety Advisory Committee if your application is accepted?

10. Being a part of the committee means attending ~~regular~~ **monthly** meetings at least ~~until June 2022~~ for up to two years. Are you available to participate at this level?

11. Please provide any additional information you think will support your selection to serve on Metro’s Public Safety Advisory Committee.

**For any of the above questions, please feel free to attach additional page(s) if needed.**

*Note: It is important that you complete all parts of the application. If your application is incomplete, your application may not be accepted.*

**APPLICANT SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_



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## How to submit your form and relevant attachments:

- 1) Email [PSAC@metro.net](mailto:PSAC@metro.net)
- 2) Mail: Los Angeles Metro  
**ATTN: Public Safety Advisory Committee**  
One Gateway Plaza, Mail Stop 99-25  
Los Angeles, CA 90012-2952
- 3) Drop off at any of the following Metro Customer Care locations during operating hours:

### **Union Station/Gateway Transit Center**

One Gateway Plaza  
Los Angeles, CA 90012  
Monday - Friday, 10am - ~~2pm~~ **6pm**

### **Baldwin Hills Crenshaw Center**

3650 W. Martin Luther King Blvd., Ste. 189  
Los Angeles, CA 90008  
Tuesday - Saturday, 10am - ~~2pm~~ **6pm**

### **East Los Angeles Center**

4501 B Whittier Blvd.  
Los Angeles, CA 90022  
Tuesday - Saturday, 10am - ~~2pm~~ **6pm**

### **Wilshire/Vermont Center**

3183 Wilshire Blvd, Ste. 174  
Los Angeles, CA 90010  
Monday - Friday, 10am – ~~2~~  
**6pm**

### **Rosa Parks Customer Center**

**Willowbrook/R P Station**  
**11720 Wilmington Ave**  
**Los Angeles, CA 90059**  
**Monday - Friday, 6am –**  
**6pm**

Feel free to call (213) 922.4866 with any questions.



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Application period closes Friday, **December 2, 2022**  
~~November 13, 2020~~