



DFS Allocated Metro Card and Usage Policy

The Department of Forensic Sciences is providing Metro cards for DFS employees who need to travel anywhere in the WMATA system in lieu of using personal vehicles for business-related needs, including meetings, hearings, approved training, etc. The following policy for Metro card usage will be in effect until further revisions:

1. DFS Metro cards are issued by the DFS Executive Assistant or designee.
2. Only DFS employees are permitted to use DFS-issued Metro cards.
3. Metro cards will be issued for business-related travel only. Use of Metro cards for personal travel is prohibited.
4. DFS employees are required to provide documentation (electronic calendar notices for meetings or meeting agendas, hearing notices, approved training or other approved business-related commitment requiring travel) to substantiate the need for travel. Employees must complete the Metro card log with a brief description of the travel prior to the issuance of a Metro card.
5. All Metro cards should be returned to the DFS within 24 hours or the next business day for continuing use of unused fare and/or value transfers.
6. An employee requiring continued use of the Metro card a consecutive day (i.e., trial testimony) must provide an electronic notice stating the need to extend use of the Metro card for the continuation of travel.
7. No disbursements will be issued via Metro cards for prior travel. Use of Metro cards is intended for future events only.
8. The decision to distribute Metro cards is at the sole discretion of the issuer.
9. Metro cards will not be issued to DFS divisions or units for exclusive individual use.
10. Cards cannot be circulated from one authorized card user to another authorized or unauthorized card user. Loss of Metro cards will result in the authorized user purchasing a replacement Metro card for the original fare amount on the card at the time the card was issued to the authorized user.
11. All DFS employees participating in the Metro card program must sign below acknowledging that they have reviewed the policy and understands and accepts its terms.

By my signature below, I acknowledge that I have reviewed this policy and understand the conditions set forth.

Print Name

Signature

Date