FIRST YEAR STUDENT PARKING REQUEST

SPRING 2009

INSTRUCTIONS:

- 1. Print this document.
- 2. Complete the form below in its entirety, including vehicle information and signature.
- 3. Forms will be accepted at the Public Safety office beginning Monday, December 1, 2008.
- 4. Forms that are properly completed will be date and time stamped upon receipt.
- 5. Forms will not be accepted from any student who has any outstanding parking fines.
- 6. Requests received after December 8th will go directly on a wait list.
- 7. Requests that meet eligibility requirement will be honored according to the guideline.
- 8. Refer to the First Year Student Parking Guideline for additional information.

Please remember to provide the information below thoroughly and accurately.

SAINT MICHAEL'S COLLEGE STUDENT PARKING PERMIT REQUEST (FIRST YEAR)

NAME (LAST, FIRST, MI)	ID NUME	BER EMA	AIL ADDRESS	
CAMPUS RESIDENCE	SMC BOX	PHONE		
STATE PLATE # YEA	AR MAKE	MODEL	COLOR	
NAME OF REGISTERED OWNER	R INSURANCE	COMPANY	POLICY NUMBER	
I agree to comply with the curre full legal and financial responsi Michael's College free from any	bility for this vehicle's	operation by my	self and others, and I agre	ee to hold Saint
I understand that violations of p subject to additional restrictions warning for any violations.				
SIGNATURE		DATE		