

# Request for **STUDENT** parking

Type of Student: [ ] Medical [ ] P.A.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ ID# \_\_\_\_\_

Department: \_\_\_\_\_ Phone #: \_\_\_\_\_

Rotation End Date: \_\_\_\_\_

## Vehicle #1

Color: \_\_\_\_\_ Year: \_\_\_\_\_

Make & Model: \_\_\_\_\_

License Plate #: \_\_\_\_\_

## Vehicle #2

Color: \_\_\_\_\_ Year: \_\_\_\_\_

Make & Model: \_\_\_\_\_

License Plate #: \_\_\_\_\_

Permit Month: \_\_\_\_\_ Permit Month: \_\_\_\_\_

Permit Month: \_\_\_\_\_ Permit Month: \_\_\_\_\_

### Responsibilities of Student Parking:

- All students must complete a parking application if they wish to park.
- All students must park on Level G (Top Level) in the North Ramp on their first day only, and will then be assigned to the **West Ramp, located on Robert and University Avenue**. Enter the ramp from Robert Street.
- Student discount parking is \$10.00 per calendar month, per vehicle and must be paid in advance.
- Evening parking is available in the East Ramp beginning at 2:20 pm Monday-Friday and all day on the weekends.
- Students who have “long calls” or “long shifts” are required to follow the exiting guidelines. There will be no special access allowed anywhere on campus. You may move your vehicle closer to campus during the afternoon shift if you wish.
- Parking is on a first come, first served basis. **YOU ARE NOT GUARANTEED A SPACE TO PARK.**
- If there is no space available in the designated area, you must find parking elsewhere at your own expense. We **DO NOT** validate parking for students who choose to park on campus.
- Parking permits are not transferable.
- Permits must be displayed on the vehicle’s rearview mirror with the month and year visible. Failure to do so may result in a ticket being issued.
- Only one ID will be issued per contract. There is a \$10.00 replacement fee for a lost ID or hangtag.
- Students must notify the Parking Office of any status or auto information change.
- Parking contracts may be cancelled for violation of parking regulations.
- Contract holders may park one vehicle at a time in their assigned areas at their own risk of any fire, theft or damage to their vehicle or contents of same.

*\*\* I have read and understand the parking responsibilities and agree to abide by them \*\**

Student’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Department Student Parking Authorization

Department Manager’s Signature: \_\_\_\_\_

(Must be signed by the Department Manager)

Department: Graduate Medical Education Phone: 651-254-1504 Position: Program Associate