

MARIAN UNIVERSITY
Indianapolis

PARKING PERMIT FORM

(2011-12 Academic Year)

For Office Use Only:

Permit #: _____

Unit #: _____

CAMS: _____

Phone List: _____

Permit Type: _____ *Commuter* _____ *Resident* _____ *Faculty/Staff* _____ *Aramark*

Other: _____ *HS* _____ *ITF* _____ *Online* _____ *MBT/Project Bridge* _____ *TFA* _____ *TLL*

First Name: _____ Middle Name: _____

Last Name: _____ Suffix (*Sr., Jr., etc.*): _____

Class Standing (*circle one*): High School Freshman Sophomore Junior Senior 2nd Degree

Street Address: _____

City: _____ State: _____ Zip: _____

Office Phone #: _____ Cell Phone #: _____

Vehicle Information:

Make: _____ Model: _____ Year: _____ Color: _____

of Doors: _____ License Plate # (*Required-include letters/numbers*): _____ State: _____

A charge will be added to your student account for the amount of your parking permit.

\$100 per semester / \$200 per year for Residents and Commuters

I understand that it is my responsibility to read and abide by the parking rules and regulations brochure located on the Marian University website. I understand that I will need to go to <http://www.marian.edu/Directions/Documents/ParkingandTrafficRegulations.pdf>. I understand that tickets can only be disputed within 7 days of receiving the ticket from the Police Department and that all disputes will be decided by the Marian University Parking Ticket Review Committee. I am responsible for reading and following the contents of the Code of Student Rights and Responsibilities which can be accessed online by going to <http://www.marian.edu/Documents/CodeofStudentRightsandResponsibilities.pdf>.

Signature _____

Date _____

Emergency Contact Name: _____

Relationship to Student: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____