

VOLUNTEER, INTERN, HOURLY, TUTOR, & MISC. EMPLOYEE PARKING PERMIT APPLICATION

COLLEGE ENROLLED AT (Please check one box only)

- NOT APPLICABLE
 MISSION COLLEGE
 WEST VALLEY COLLEGE

PERMIT YOU ARE REQUESTING (Please check one box only)

- FALL SEMESTER
 SPRING SEMESTER
 SUMMER TERM

CONTACT INFORMATION

LAST NAME			FIRST NAME			MIDDLE INITIAL		
RESIDENCE STREET ADDRESS				MAILING STREET ADDRESS (if different)				
CITY	STATE	ZIP	CITY	STATE	ZIP			
STUDENT ID#	CELL PHONE	HOME PHONE	E-MAIL ADDRESS					

EMPLOYMENT INFORMATION

DEPARTMENT	POSITION TITLE	WORK PHONE
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VEHICLE INFORMATION

LICENSE PLATE #	MAKE	MODEL	COLOR	YEAR
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PARKING REGULATIONS (abridged)

It is the driver's responsibility to know and abide by all parking regulations pertaining to the West Valley-Mission Community College District. Acceptance and use of a parking permit constitutes an agreement by the user to comply with all District parking and traffic regulations. Purchase of a parking permit does not guarantee the purchaser a parking space. The West Valley Mission Community College District assumes no liability for damage, loss, theft, or other acts which occur to private vehicles or property at District facilities. Vehicles left after regular school hours without prior approval of the District Police are subject to tow per C.V.C. 22651. Failure to properly display a valid parking permit and/or parking in an unauthorized area will result in a parking citation. A complete copy of the West Valley-Mission Community College District Parking Regulations is available at the Police Business Office located in the Campus Center.

I have read and understand the parking regulations provided above.

Employee Signature _____ Date _____

Driver license # _____

YOUR SUPERVISOR MUST COMPLETE THE FOLLOWING SECTION. UPON COMPLETION, PLEASE BRING THIS FORM AND A VALID IDENTIFICATION CARD TO THE POLICE OFFICE LOCATED AT THE CAMPUS CENTER

FOR SUPERVISOR USE ONLY	EMPLOYMENT TYPE <small>check one:</small> <input type="checkbox"/> Part-time Hourly <input type="checkbox"/> Volunteer <input type="checkbox"/> Intern <input type="checkbox"/> Tutor <input type="checkbox"/> Misc.	LOCATION <small>check one:</small> <input type="checkbox"/> West Valley <input type="checkbox"/> Mission <input type="checkbox"/> District		
	SEMESTER <small>check one:</small> <input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring <input type="checkbox"/> Summer			
	Period of Employment: From _____ To _____			
	I have verified the applicant is not registered as a student in this District and the applicant has read and signed this form. I certify that the applicant is entitled to receive a no cost Student Parking Permit based on work status.			
	Supervisor Print Name _____	Supervisor Signature _____	Extension _____	Date _____