University of Cincinnati Blue Ash College

FULL-TIME FACULTY AND PERMANENT STAFF PARKING REGISTRATION

First Name:	Last Name:
Department:	
Car #1 Year/Make:	Car #1 License:
Car #2 Year/Make:	Car #2 License:
	For Office Use Only
Permit #	Date Issued
DECAL ACCEP	TANCE AND/OR SIGNATURE BELOW SIGNIFIES
UN	DERSTANDING OF THE FOLLOWING:
	m responsible for compliance with the University of Cincinnati ual cost for parking will be deducted on a monthly basis from my RC section 132(f).
Signature	Date

Please note that Adjunct Faculty/temporary employees may not select payroll deduction. Payment for semester parking decals must be made at the time the decal is received.