

QUARTERLY CARPOOL PARKING PERMIT APPLICATION

Complete this form in pen. Submit this form in person with photo ID to Cascadia Community College, Kodiak Corner Front Counter, 18345 Campus Way NE; Bothell, WA 98011.



Cascadia CC Student ID Number (eg: 96X-XX-XXXX)	Select quarter and note year <input type="checkbox"/> Summer <input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring 20	
THIS SECTION TO BE COMPLETED BY THE PAYING APPLICANT. CHECK ONE: <input type="checkbox"/> STUDENT <input type="checkbox"/> FACULTY <input type="checkbox"/> STAFF	FIRST NAME	M.I.
LAST NAME		

QUARTERLY CARPOOL PARKING PERMIT APPLICATION (RC) \$63 * Parking Payment is enforced 7 days a week.

Please be aware prices are subject to change. The Carpool Parking Permit can only be sold directly to the STUDENT or EMPLOYEE. Photo ID is required.

CARPOOL APPLICANTS MUST MEET THE FOLLOWING CRITERIA:

- All carpool members must be faculty, staff, student or affiliate of Cascadia Community College (or UWB) performing their responsibilities on the campus.
- All carpool members must present their Cascadia (or UWB) ID Cards at the time of applying for the permit and must be currently enrolled or working at Cascadia or UWB. UWB students must present a current UWB class schedule.**
- All members must commute to Cascadia as a carpool three or more days per week (one day may be a study day).
- The driver of the carpool must have a valid driver's license and must be one of the following categories – a student or a faculty or staff member employed in a permanent position on campus, a temporary/hourly member working at least three days per week throughout the quarter, or a retiree who is re-employed on a part-time basis.

ALL MEMBERS OF THE CARPOOL PARTY (INCLUDING PAYING APPLICANT) MUST COMPLETE BELOW AND SIGN:

CARPOOL MEMBER NAME	CCC or UWB	STUDENT ID# or EMPLOYEE ID#	STUDENT, FACULTY OR STAFF	CAR MAKE, MODEL & YEAR	VEHICLE LICENSE PLATE #	DAYS ON CARPOOL
						<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/> Sat <input type="checkbox"/> Sun
						<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/> Sat <input type="checkbox"/> Sun
						<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/> Sat <input type="checkbox"/> Sun
						<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/> Sat <input type="checkbox"/> Sun

We have read and agree to abide by the Cascadia Community College's carpool criteria as listed above.

PRINT NAME	SIGNATURE	DATE

OFFICE USE ONLY

RECEIVED BY	DATE PAID	DOCUMENT NUMBER	LICENSE PLATE ENTERED	YR/QTR CODE

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