Chabot – Las Positas Community College

Student Semester Parking Permit Application

For students *without* **CLASS-Web** Access

(Type or print clearly)

Select a term: (May only be current term) Fall _____ Summer _____ Spring _____

$40 $20 $40

Select your campus of record: Chabot College _____ Las Positas College _____

Student Information:

Last Name	First Name	Middle Initial	Date of Birth

Residence Address	City	State	Zip Code

( )____-_____ ( )____-_____ ( )____-_____

Home Phone Mobile Phone Other

Vehicle Information

Select Vehicle Type(s): Auto _____ Motorcycle _____

	License Plate	State	Vehicle year	Vehicle Make	Vehicle Model	Vehicle Color
#1						
#2						
#3						
#4						

Vehicle models can be: 2 door, 4 door, Van, Station Wagon,

FOR USE BY AUTHORIZING DEPARTMENT / PROGRAM ONLY

We certify that the above listed student is currently a registered student in our program and is entitled to purchase a student semester parking permit.

The student has paid our department $40 for a Fall or Spring student semester parking permit; $15 for motorcycle only parking permit or $20 for a Summer student semester parking permit; $7.50 for motorcycle only parking permit.

The payments for these permits will be processed in accordance with CLPCCD accounting procedures.

Department / Program name	Dean / Mgr. / Dir. name
Signature of Authorizing Party	Printed Name of Authorizing Party

FOR USE BY DEPARTMENT OF CAMPUS SAFETY AND SECURITY ONLY

Permit Number (issued)	Date Issued	Issued by (print name)	Issued by (signature)

Permit DATA entered by:	Printed Name	Signature	Date Entered