





## Police Department Request for Parking Permit

Please complete all portions of this application and submit to the Marietta College Police Department or mcps@marietta.edu. Incomplete applications will not be reviewed. Your application will be reviewed as soon as possible. You will be contacted via email with further instructions. If you are a Marietta College staff member or student, please use your Marietta email address.

| Applicant Information   |   |                |
|---|---|----------------|
| Full Name:  |   | Date:          |
| Marietta College ID Number: Email Address:  |   | ss:            |
| Driver's License Number: Driver's License State:  |   | cicense State: |
|   | Employee – Staff or Faculty (including Adjunct) |                |
|   | Dining Services Employee                        |                |
|   | Commuter Student                                |                |
|   | First Year Student                              |                |
|   | Upper Class Student                             |                |
|   |   |                |
| Disclaimer and Signature  |   |                |
| My answers are true and complete to the best of my knowledge.   |   |                |
| I understand that false or misleading information in my application may result in denial of a permit. |   |                |
|   | Signature:                                      |                |