

COLLEGE OF AGRICULTURAL SCIENCES
PARKING PERMIT AUTHORIZATION FORM

EMPLOYEE NAME: _____

DEPARTMENT: _____ PSU ID: _____

EMPLOYEE CLASSIFICATION:

_____STANDING _____FIXED TERM _____WAGE PAYROLL

****PLEASE NOTE: STUDENTS ON WAGE PAYROLL ARE NOT ELIGIBLE FOR FACULTY/STAFF PARKING-
STUDENT PERMITS ARE AVAILABLE AT 1 EISENHOWER PARKING DECK****

VEHICLE INFORMATION

LICENSE PLATE NUMBER: _____ STATE: _____

MAKE/MODEL: _____

VEHICLE 2 (IF APPLICABLE): _____ STATE: _____

MAKE/MODEL: _____

PERSONAL INFORMATION

OFFICE ADDRESS: _____

OFFICE PHONE: _____

HOME ADDRESS: _____

EMAIL: _____

ADMINISTRATIVE/DEPARTMENTAL APPROVAL

**WITH MY SIGNATURE, I VERIFY THAT I AM AN EMPLOYEE OF THE PENN STATE UNIVERSITY, COLLEGE
OF AG SCIENCES AND HAVE RECEIVED AN EMPLOYEE PERMIT:**

EMPLOYEE SIGNATURE

PARKING CHAIRPERSON APPROVAL