



Request for Waiver of Parking Fee

All students must register their intent to park a vehicle on campus and obtain a parking sticker by the first day of class each semester. All parking stickers are sold on a first-come, first-serve basis. Possession of a sticker for a specific lot gives you the privilege of parking in that lot but does not guarantee a parking space. Parking in any reserved and visitors' spaces will result in a ticket or the possibility of your vehicle being immobilized by a vehicle boot device. No vehicle may be parked on campus without a parking sticker affixed to your vehicle or a temporary one-day parking hang-tag. The parking sticker should be affixed to the lower left rear window of the vehicle (back window driver's side). Convertible automobiles or vehicles with a removable rear window should affix the sticker to the lower left front window (below state inspection sticker). Any vehicle that does not have the sticker affixed in the proper location or not readily visible may be subject to a citation.

By signing below and having received a credit of \$78.00 for the specified semester from the Office of Student Financial Services you have pledged that you will not be operating a motor vehicle on Missouri Baptist University property for that semester. Those individuals who have been found to be operating motor vehicles on University property in violation of the above stated policy will be subject to administrative disciplinary action to include a fine and/or loss of all driving and parking privileges on University property for the remainder of the given semester. This waiver form must be completed for each semester individually and only applies to the indicated semester below.

On this the ____ day of _____, 20____, I _____ do hereby affirm that I will receive a \$78 credit from the University Business Office and will not be operating a motor vehicle on University property for the specified semester below. I further affirm that if I decide to operate a motor vehicle on University property, I will contact the University Public Safety Office within two days so that I may be charged for and receive my vehicle parking permit.

Semester: _____ Student ID Number: _____

Last Name: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Alt Phone: _____

Email: _____

Student Signature: _____

PUBLIC SAFETY Processed Registration (Initials): _____