

Office of Personnel Services **Bethany College** 31 E Campus Dr Bethany, WV 26032

Faculty and Staff Parking Application

Return form to:	Department of Campus Safet Bethany College Bethany, WV 26032	ty and Security
Permit Number:		Date:
Class: Faculty		
* <i>Indicates required</i> Vehicle Informat	0	
*Make:		Model:
Year:		Color:
*License Number:		*State:
Last Name:		First Name:
*Department:		Building:
		Cell Phone:
	Parking citations will co	mmence with the first day of classes.

I hereby apply for permission to keep and operate an automobile while I am an employee at Bethany College. To the best of my knowledge, the questions above have all been answered correctly. I have read, understand, and do hereby pledge to abide by all regulations governing the use of automobiles as stated in the Bethany College Handbook.

Upon being issued a Faculty Parking Permit, it must be placed in the front windshield hanging from the rear view mirror. Failure to properly display my permit may result in fines and/or towing if parked in such a manner to warrant having to vehicle towed.

I will also notify Security if I transfer my Permit to another vehicle, and/or get a temporary parking pass for a non-registered vehicle that I may be using short term.

Full Signature: _____ Date: _____