

Date: _____ Banner ID: - -

Last Name: _____

First Name: _____

Address: _____
Street or Box City State Zip

Home Phone: - Work Phone: -

Email: _____
@memphis.edu

Type of Parking Requested

Permit # _____

General Parking Only: Yes No

Priority Parking Requested: Yes No Lot #: _____
All Day Evening Only (After 4:30 PM)

Employment Information

Dept: _____

Employment: Full Time Part Time Temporary Contract Graduate Assistant

If Temporary or Contract , Date Assignment Begins: _____

Date Assignment Ends: _____

Payroll Type: Monthly Bi-Weekly Quarterly

NOTE: Faculty/staff must receive one payroll check from the University of Memphis each month, 12 months a year, in order to be eligible for payroll deduction. If you do not receive one paycheck each month you must pay by semester.

For Office Use Only

Cash Check Credit Card Amount Paid \$ _____

Win DSX _____ Date _____

Power Park _____ Date _____