## VIRGINIA COMMONWEALTH UNIVERSITY STUDENT PARKING APPLICATION SUMMER 2006

\$14.25 per week. Specify dates nee	eded: from	to	
(if you wish, you can purchase park	ing privileges o	on a weekly basis rath	er than all at once)
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Social Security Number:			
Last Name:	First Name:		Middle Initial:
Local Street Address: Gladding, 71	11 W Main	City: <u>Richmond</u>	Zip: <u>_23220</u>
Home telephone number: ()		_ School tel number:	(unknown)
VCU ID Card Number: <u>(unknown</u>	at present)		
Email Address:			
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School: <u>Division of Life Sciences</u>	/ School of Eng	gineering	
Program: Bioinformatics and Bio	engineering Su	mmer Institute	
Dormatory Name: <u>Gladding Resid</u>	lence Center	Room #: <u>(unl</u>	known at present)
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Yes, I have received a	a copy of the Pa	arking Guidelines	
SIGNATURE:		Date	e:

(THE APPLICATION MUST BE COMPLETED, SIGNED, AND DATED TO BE VALID)

Fax to Jeff Elhai, 804-828-1961 at least two weeks before arrival at VCU