



2018 Summer Student Parking Decal Request Form

(Good only for students who have registered in one of QC's three summer sessions.)

INSTRUCTIONS

Please print and bring completed form with your vehicle registration and driver's license to **Office of Public Safety**, Jefferson Hall 201.

DECAL OWNER INFORMATION

Name _____ CUNYFirst ID _____
Last (family name) First Middle Initial

Address _____
Number and Street Apt. # City State Zip Code

Home Phone No. () _____ Work Phone/Cell No. () _____
Area Code Area Code

VEHICLE INFORMATION

License Plate No. _____ State _____

Make of Car _____ Year _____ Color _____ Type _____

Owner's Name _____
Last (family name) First Middle Initial

Owners Address _____
Number and Street Apt. # City State Zip Code

DO NOT WRITE BELOW THIS LINE – FOR OFFICIAL USE ONLY

DECAL INFORMATION

Decal No. _____ Field No. _____

Application Accepted By _____ Date _____

