



EMERITA/EMERITUS PARKING PERMIT AUTHORIZATION

Name (Last, First, MI - as written on your paystub)

UH ID Number (8 digits, no dashes or spaces)

Email Address

Phone Number

Office Number

Group

Permit Zone

Academic Year

Reason for Parking Permit

NOTE: We ask that this permit only be utilized by the emerita/emertus it is issued to. Use by friends, family, or former coworkers is prohibited and may result in vehicle citation or towing, referral to the Office of Human Resources (for UH employees) or the Office of Judicial Affairs (for UH students), and/or permit revocation.

Awards for permits are based on the discretion of the Commuter Services Office and may be awarded dependent on available resources (EP 9.209).

TO BE COMPLETED BY DEAN/DIRECTOR

I certify that the above individual is an emerita/emertus with need for a parking permit.

Signature	Email
Print Name	Phone