

ST. GEORGE'S UNIVERSITY TEMPORARY PARKING PERMIT DECAL FORM

Please check the box	specifying your SGU st	atus:		
STUDENT: Schoo	ol:	Term/Year:		
STAFF: Dept:				
Gira FACULTY: Dept:				
□ REGISTERED SIGNIFICANT OTHER		ID #:		
UVISITOR (Purpos	se of visit)			
Name:				
Local Phone Number(s)		E-mail	E-mail	
Grenada License No:		Date Issued:	Date Issued:	
Insurance Company/	Policy			
Do you have a SGU I	Decal on another vehicle	e? YES / NO : Decal #		
Vehicle Information:				
Make:	Mod	lel:	Year:	
Color:	License Disk #	4:	Registration#	
Name of Registered (Owner (or Rental comp	any):		
Please note that you are	e expected to abide by the	Campus Rules and Regulation	ns when parking your vehicle	
on campus. You are al below	lowed to park in designate	ed VISITOR parking lots ONI	LY, unless otherwise indicated	
		RITE BELOW THIS LINE		
Dates approved for T	Cemporary Permit:	to		
		park in the following lot:		
STAFF	STUDENT	FACULTY	VISITOR	
DATE ISSUED:	DE	ECAL # PARH	XING LOT #	
Signature of Chief of	Security or designee			

Instructions

All persons (including Faculty/ Administration, Staff and Students) applying for parking permits must fill out the Form completely.

The following information is required and copies of the following relevant documents <u>must</u> be presented when applying for the permit. DPSS does not make copies, you must bring copies with you when you submit the form.

- A valid driver license (for non-grenadians, a temporary driver's permit is required and can be obtained at the police station.)
- Your valid S.G.U Identification card
- Vehicle insurance certificate with at least 3 weeks validity
- Vehicle license disk number



* The number is located at the middle bottom of the sticker which is located on the Vehicle windshield.