



Overnight Parking Exception Request Form

Student Name: _____ **Student ID:** _____

Email Address: _____

Major: _____

Please explain below your reason(s) for this request. Attach copies of any supporting documentation. Please note that all exceptions are for academic or university business reasons only. An example of an academic reason is *when a student is required to remain on campus after 2:00 AM for research in a lab. Your academic department must support this. University business may be when students are away on a field trip sponsored by an academic department or for purposes of attending a conference as a member of a recognized university organization.* Indicate the dates for when overnight parking is needed. I would like to be considered for permission to park overnight on campus due to:

Start Date: _____ **End Date:** _____

I understand that the information provided here is confidential and that it will be reviewed and verified by the Director of Operations for Strategic Events and Conference Services and/or his/her representative(s). Providing false information to a university official is a violation of the student conduct code and would lead to disciplinary action.

Complete this form and return it five (5) business days before the requested date to the Campus Center, Strategic Events and Conference Services, Suite 101. You will be contacted within 72 hours via email of a decision based on this request, provided all documentation has been received.

OFFICIAL USE ONLY

Approved: _____ **Date:** _____

Denied: _____ **Date:** _____