



REQUEST FOR PARKING FEE WAIVER

Name: _____ Date: _____

Campus: _____

I am requesting a parking fee waiver for the following reason:

I understand that if I park a vehicle on college property I will be subject to a parking fine and/or towing.

Signature _____ Date _____

Please forward completed waiver form to Jodi Phelps in Human Resources
jodi.phelps@minnesotanorth.edu

OFFICE USE ONLY

_____ Approved Ongoing _____ Approved for _____
(i.e. Specific timeframe Semester/Academic Year)

_____ Denied

HR Signature _____ Date _____

Business Office Signature _____ Date _____

Vice President of Finance and Facilities