

Volunteer Parking Request

This form is to be used to request a daily parking fee waiver for university-approved volunteers. University approved volunteers may receive complimentary parking only for the day(s) for which they are volunteering. The department or volunteer is responsible for any unwaived parking fees. Please submit completed form to Parking@calstatela.edu. **Please allow 3-5 days processing time.**

Requesting Department Info	rmation													
Department					Dept. Contact Name							Office Extension		
Volunteer							•							
Last Name				First Name				Duties and Assignments						
Please select month and dates they	/ will be vo	olunteer	ing											
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Volunteer														
Last Name				First Name				Duties and Assignments						
Please select month and dates they	/ will be vo	olunteer	ing						-					
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Volunteer														
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Please select month and dates they will be volunteering														
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Volunteer														
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Authorized Signature	A	Authorized Name and Title (Print)							ate					
Welcome Center Use Only														
Dat	Date received: Received by:													
Vol	lunteer(s)	Confirm	ed:	Yes		D INI:	. <u> </u>	D	ate:					
Permit Number(s):														

Department of Public Safety / Welcome Center

5151 State University Dr. Los Angeles, CA 90032-8560

Phone (323) 343-3704