



NORTH CAROLINA AGRICULTURAL AND TECHNICAL STATE UNIVERSITY

PARKING AND TRANSPORTATION SERVICES

PARKING SERVICES

This form is to be utilized to request parking services for University events. Please complete this form and return it via fax, email, or in person to the University Event Center at (336) 256-2060 or uec@ncat.edu. Your confirmation will be emailed to you after processing.

Contact Information

Contact Person: _____ Email : _____
Department/Organization: _____ Phone Number: _____

Event Information (Please check all that apply)

VIP Parking Vehicular/Pedestrian Assistance Other: _____

Total Visitor Spaces Requesting (if applicable): _____

Name of Event : _____ Date of Event: ____/____/____

Location/Facility _____ Expected headcount: _____ Time of Event: _____

Additional/Special Instructions:

Four horizontal lines for additional instructions.

Print Name: _____ Signature: _____ Date: _____

PARKING SERVICES USE ONLY

RECEIVED BY: _____

RECEIVED ON DATE: _____

APPROVED DENIED

of Spaces Approved: _____

Date & Time: _____

Parking Area: _____

Total Hours of Service Required: _____

of Parking Attendants Assigned: _____

Authorized by: _____ Date: ____/____/____