THE GEORGE WASHINGTON UNIVERSITY WASHINGTON, DC

THE GEORGE WASHINGTON UNIVERSITY AUTHORIZATION FOR PARKING DEDUCTION

E-mail the completed form to parking@gwu.edu

NAME:			GWID:				
Effective Date of Change:		New En	New Enrollment		Change	Termination	
Affiliation	MFA	Pay Frequency	Bi-Weekly (B	W)	Parking Location	Foggy Bottom	
	UHS		Monthly (MC))		Mount Vernon	
GW University			9 Month Fac	ulty			
Indicate parking	Car		Carpool			Motorcycle	
If Carpool, indicate who you are carpooling with (name): Primary Work Address/Building (we will do our best to assign parking in a close garage)							
Indicate salary ran	ge Belov	v \$ 50K	\$ 50K - \$ 90H	<		Over \$ 90K	
New Contracts: I hereby authorize deduction from my paycheck for parking privileges effective the beginning date noted above. I understand that my deduction for parking privileges will automatically be adjusted to reflect any changes in university parking rates and deductions will continue until I officially sign forms to terminate parking privileges. I hereby agree to adhere to all the rules and regulations established by the University and Parking Services regarding the Parking Program. Note: Parking rules can be found at parking.gwu.edu. This approval for payroll deductions will suspend other pre-tax transportation deduction arrangements (TransIT). Employee Signature (Electronic signature or employee signature only) Date							
To be completed by Parking Services							
Payroll eff. Date				Dec	ducted amount / MO		
If prorated amount Last \$ deduction if terminated				Prorated \$ for first deduction			
Lot #		Sticker #		ADDITION	IAL NOTES FOR PAYROLL	:	
Gworld ID #		Puck #					
To be completed by Payroll Services Plan code							
Deduction start da	te	Process	sed				

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WASHINGTON, DC

GW PARKER INFORMATION FORM

Applicant Information:			
Name:			
Street Address:			
City, State and Zip Code:			
Phone number:			
Email Address:			
Signature:			
Date:			
CARPOOL Information	(Please list the Name and GWID # of 2nd Driver)		
Name:			
GWID #			
Email Address:			
Vehicle #1 Information	New	Change	
Year / Color:			
Make / Model:			
Tag number / State:			
Vehicle #2 Information	New	Change	
Year / Color:			
Make / Model:			
Tag number / State:			

Please return completed form to parking@gwu.edu for processing. If you have any questions, please email us at the same address, or call (202) 994-7199