

Kent State University College of Podiatric Medicine

PARKING TERMINATION FORM

CLASS YEAR: _____ EFFECTIVE DATE: _____

BANNER ID: _____ SEMESTER: _____

NAME (last,first): _____

SIGNATURE: _____

VEHICLE MAKE: _____ VEHICLE YEAR & MODEL: _____

COLOR: _____ LICENSE PLATE NO: _____ STATE: _____

ISSUED BY _____

DATE _____

Place Hang Tag Here

**If you waived parking last semester, please
write "Waived Last Semester"**

Return completed form to
Dan Ridgway

PLEASE NOTE:

KSUCPM does not maintain reciprocal parking agreements with the City of Independence or our neighboring businesses. KSUCPM students are NOT authorized to park in any other location than our lots while on campus. Parking off campus is done at your own risk and may subject you to fines and/or towing charges. All stickers must be turned in before credit is issued. Parking waivers must be renewed each semester.