



## Minneapolis College of Art and Design Public Safety Department- Request For Car Pool Parking

Each member of the car pool must complete and sign this application, and read and agree to the rules set forth in the MCAD parking and transportation guide. Failure to comply with the car pool parking rules may result in forfeiture of the assigned car pool parking permit. To qualify, there must be a minimum of two drivers; all those in the car pool must work at MCAD and car pool together at least three days a week; and must also enroll and be authorized by Metro Transit rideshare.

Metro Transit Ride Share- Registered Number: \_\_\_\_\_ MCAD space: \_\_\_\_\_  
Contact Person:

|  |
|--|
| Name: _____  |
| Home address: _____  |
| City: _____ State: _____ Zip: _____                        |
| College department: _____ contact phone: (____) _____      |
| work phone: (____) _____                                   |
| Vehicle description- Make: _____ Model: _____ Color: _____ |
| License #: _____ State: _____                              |

Other Carpool Members:

|  |
|--|
| Name: _____  |
| Home address: _____  |
| City: _____ State: _____ Zip: _____                        |
| College department: _____ contact phone: (____) _____      |
| work phone: (____) _____                                   |
| Vehicle description- Make: _____ Model: _____ Color: _____ |
| License #: _____ State: _____                              |

Name: \_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

College department: \_\_\_\_\_ contact phone: (\_\_\_\_) \_\_\_\_\_

work phone: (\_\_\_\_) \_\_\_\_\_

Vehicle description- Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

License #: \_\_\_\_\_ State: \_\_\_\_\_

Name: \_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

College department: \_\_\_\_\_ contact phone: (\_\_\_\_) \_\_\_\_\_

work phone: (\_\_\_\_) \_\_\_\_\_

Vehicle description- Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

License #: \_\_\_\_\_ State: \_\_\_\_\_

I certify that I am a member of a carpool, and will be upon receipt of a carpool parking permit with the individuals listed above. This permit must be displayed when parking in the van/car-pool space.

Signature

Date

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_