

**USCA STUDENT PARKING DECAL FORM
ACADEMY OF LIFELONG LEARNING**

NAME: _____

EMAIL: _____

VEHICLE YEAR: _____ COLOR: _____

MAKE: _____ MODEL: _____

LICENSE PLATE #: _____ STATE _____

CELL PHONE: _____

**BRING THIS FORM, YOUR DRIVERS LICENSE, AND VEHICLE REGISTRATION TO:
USCA CONTINUING EDUCATION OFFICE
BUSINESS AND EDUCATION BUILDING
ROOM 113**

----- **FOR UNIVERSITY POLICE USE ONLY** -----

DECAL # _____

DATE ISSUED: _____/_____/_____