

Public Safety Office 491 Cottekill Road
HAS 133 Stone Ridge, NY 12484
845-687-5023 www.sunyulster.edu



Student ID / Parking Permit Application

Student should bring course schedule and a valid, current photo ID (Driver's License or SUNY Ulster ID) to the Public Safety Office, HAS 133.

Applicant

Date _____ / _____ / _____

Name _____
Last First MI

Student/Employee ID: U _____

Check Appropriate Box Student Faculty /Staff

Vehicle 1

Vehicle 2

YEAR Make _____

YEAR Make _____

Model Color _____

Model Color _____

License Plate # State _____

License Plate # State _____

Security Office Use Only: Issuing Officer Badge # _____ // Date _____

Permit # 1. _____ #2 _____

Emergency Contact Information

Name _____
Last First MI

Street Address _____

City, State, Zip Code _____

Phone # _____ Alternate # _____

Please fill out back.

The information entered below will be submitted to the SUNY Emergency Contact Information System. This information will be used in conjunction with the New York State All-Hazards Alert and Notification web-based portal and the New York State Emergency Management Office (SEMO).

Note: Emergency contact information is collected and provided only for MASS emergency notifications by authorized campus management.

***Required Fields**

***Student/Employee ID:** U _____

***First Name**

Middle Initial

***Last Name**

***Affiliation Type:** Student Employee Other

If Affiliation Type "Other" was chosen, please briefly explain your affiliation with the campus:

***Primary E-mail Address (most commonly used):** _____

Second E-mail Address: _____

NOTE: **Standard charges will apply for voice notifications when cell numbers are listed. Please include your 3 digit area code, the 7 digit number, and an extension number if applicable.

***Primary Telephone Number:** _____

Second Telephone Number: _____

Third Telephone Number: _____

NOTE: **Standard charges will apply for all text messages at this time. Please include your 3 digit area code, and the 7 digit number.

Text Messaging #1: _____ **/Provider:** _____

Text Messaging #2: _____ **/Provider:** _____

I have received the SUNY Ulster Student Code of Conduct including policies on Alcohol, Drugs and Domestic Violence.

I authorize this information to be entered into the SUNY Ulster Emergency Contact Information System.

Student Signature: _____ **Date:** _____