



Office of the Bursar

Signers' Hall First Floor, P.O. Box 757370
Fairbanks, Alaska 99775-7370
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UAF FAMILY FRIENDLY PARKING PERMIT APPLICATION

In support of the Chancellor's efforts to make the University of Alaska Fairbanks campus more family-friendly, the following program is meant to increase accessibility for expectant and new mothers who need to park close to their classes or workplace. The goal is to provide parking locations close to entrances to provide shorter and safer walks. In addition to temporary handicap permits for students and employees who become disabled by pregnancy, the *UAF Office of the Bursar* with the support of the *UAF Office of Diversity* and Equal Opportunity will issue special Family Friendly permits for expecting and new mothers who demonstrate a need for close-in parking. This permit will allow parking in a designated metered lot in the core of campus without paying hourly meter prices. ***If you have a mobility disability and need handicap (HCP) parking, please submit an Application for Disabled Parking <http://www.uaf.edu/finserv/bursar/parkingservices/ApplicationDisabledParking.pdf> either to the UAF Office of the Bursar for a one month HCP permit or to DMV for a longer HCP permit.*** Complete this Family Friendly Parking Permit Application if you do not qualify for an HCP permit.

Note: The permit is only valid when used with a current UAF decal or hanger.
Instructions: Employees should complete and sign the form. You will need the signature of your Physician and the time period that you require the permit. The parking forms may be dropped off at the Bursar's Office, First Floor Signers' Hall or mailed to the address listed above. Indicate whether you would like to pick-up or have your permit mailed to you. If you have questions or need additional information please do not hesitate to contact the Bursar's Office.

Employee/Student Information:

Name _____
Last First M.I

Work Location: _____
Street Location Building

Class Location: _____
Street Location Building

Other Location: _____
Street Location Building

Closest Metered Lot(s) _____

Family Friendly permit is requested from ____/____/____ to ____/____/____

Physician's Information:

To be completed by physician, physician assistant or nurse practitioner.

To be eligible for a UAF Family Friendly permit, the applicant must meet one or more of the following criteria. Please check which criteria the applicant meets. A new application is required every six months or when an applicant needs a Family Friendly permit beyond the validity of their current UAF parking permit.

- Applicant is in the third trimester of pregnancy.
Due Date _____
- Applicant's ability to walk comfortably is affected by pregnancy.
Due Date _____
- Applicant routinely leaves the UAF campus to breastfeed.
Expected End Date _____
- Applicant's child is routinely brought to campus for breastfeeding.
Expected End Date _____

I certify, by my signature as an Alaska licensed physician, physician assistant or nurse practitioner, that the applicant meets the designated criteria.

Physician's Name _____ Date: _____
please print

Physician's Signature _____ Date: _____