

DOANE EMPLOYEE REGISTRATION FORM

NEW APPLICATION

RENEWAL APPLICATION

SECTION I: Personal Information	
Name:	
Datatel Number:	
Position:	
Status:	
Section II: Vehicle Registration	
Plate Number: _____	Vin Number _____
State/Province _____	
Vehicle Type: _____	Vehicle Make: _____
Vehicle Model: _____	Vehicle Color: _____
Vehicle Year: _____	Expiration Year: _____
Insurance Company: _____	
Insurance Policy Number : _____	

TO BE FILLED OUT BY THE SAFETY OFFICE

DATATEL DATE: _____ REPORT EXEC DATE: _____ FILED DATE: _____

Section III: Permit Registration	
Permit type: _____	Bar Code: _____
Permit Number: _____	
Assigned Date: _____	Valid Date: _____
Expiration Date : _____	
<input type="checkbox"/> Replacement Permit	
<input type="checkbox"/> Lost	
<input type="checkbox"/> Stolen Lost Date (If Lost): _____	

Please Read:

There are designated parking spaces on campus for faculty, staff and students. Please review available parking spaces by going to: <http://www.doane.edu/Students/Campus/Safety/parking/>. Registering your vehicle indicates agreement with all Doane parking policies. Your registration may be revoked at any time for violation of Doane parking policy.

Signature: X _____ Date: _____