

EASTERN MICHIGAN UNIVERSITY
GRADUATE ASSISTANT
HANGTAG REQUEST FORM

Please print and fill out completely

Date: _____

EMU STUDENT ID # _____

Name: _____
Last First M.

Campus Address: _____ Campus Phone _____

License Plate #: _____ State: _____ 2nd License Plate # _____ State: _____

Department Billing Information (Hangtags paid by Department Only)
(Department Secretary: Please complete all information)

Department Name: _____

Banner Fund: _____ Banner Orgn: _____ Banner Prog: _____

Department Address: _____ Phone: 487- _____
Room Building

Authorized Staff Signature

Date

For Internal Use Only:

Tag: _____ Rep _____ Date: _____

Picked up by: _____

EMU PARKING DEPARTMENT
1200 OAKWOOD
YPSILANTI, MICHIGAN 48197

Phone: 734-487-3450
Fax : 734-480-4847

REVISED 06-05-09

NO OTHER APPLICATION WILL BE ACCEPTED