

For employees with temporary mobility impairments in need of an accessible parking pass, a scooter rental, or point to point transportation while on campus at Clemson University. For mobility impairments lasting longer than 4 months, employees are encouraged to apply for a state issued DMV handicap placard. **Employees must present documentation of a mobility-related disability to the Division of Civil and Individual Rights to priscih@clemson.edu.**

STEPS:

1. Complete information in SECTION I.
2. **Allow 48 hours for processing of most requests.** Once application is approved, employees will be notified by email and may then go to Parking and Transportation Services to pick up accessible parking pass, rent scooters, or arrange point to point transportation.

SECTION I. TO BE COMPLETED BY EMPLOYEE

Name _____ Phone _____

Department Name and Number _____

Employee ID _____ Email (@clemson.edu) _____

Primary location in which you need to park _____

Check all that apply below:

- ☐ Accessible parking pass related to pregnancy (Note: a current Clemson Parking Permit is required for issuance)
- ☐ Accessible parking pass (Note: a current Clemson Parking Permit is required for issuance)
- ☐ Scooter rental: Scooters are rented through Parking and Transportation Services for a fee on a weekly basis.
- ☐ Point to Point Transportation: Employee is responsible for contacting Parking and Transportation Services to disclose specific scheduling and transportation needs. DCIR will provide you with this contact information.

FOR ALL REQUESTS, please check below and sign/date

- ☐ DCIR may share information as needed with Parking and Transportation Services to facilitate this request.

Signature _____ Date _____

SECTION II. TO BE COMPLETED BY ACE STAFF ONLY

- ☐ Disability Documentation is current and has Disability Specialist approval for accessible parking pass:

For the following timeframe: Beginning _____ Ending _____

- ☐ Disability Documentation is current and has Disability Specialist approval for scooter rental:

For the following timeframe: Beginning _____ Ending _____

Emailed to parking@clemson.edu By _____ Date _____

- ☐ Disability documentation is current and has Disability Specialist approval for point-to-point transportation:

For the following timeframe: Beginning _____ Ending _____

Emailed to transit@clemson.edu By _____ Date _____

TEMPORARY PARKING PASS ISSUED # _____