

Los Angeles Unified School District Headquarters Office of the Building

PARKING ASSIGNMENT EXCEPTION REQUEST

Employ	/ee/Contractor #:
Phone	
Locatio	on Code:
Cubicle	e/Office #:
Branch	:
Reque	sted Parking Assignment:
No)	
Date:	
ovide the name o	f the individual to reassign:
	Employee/Contractor #:
Senior L	eadership Division Head Approval:
Name:	
Name:	
Date:	
Date: OfficeoftheBu	
Date: OfficeoftheButto the Office of the	ilding@lausd.net e Superintendent for FINAL approval.
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