## Request for Niner Paratransit Scheduled Services

NINER PARATRANSIT

Name _____

49er Card ID# _____ Date _____

Phone _____ Please check: ☐ Student ☐ Employee ☐ Other

Academic semester_____ Campus email _____

| *Pickup Location* | *Drop-off Location* | *Day of Week* | *Time* |
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If notified of eligibility to receive transport services, you may complete and return this form to:
**Parking and Transportation Services**
**Fax: 704-687-5258**

For questions about the service, contact Helena Connors, hconnor2@uncc.edu

UNC CHARLOTTE

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