



**Southern Illinois University Carbondale  
Department of Public Safety–Parking Division**

1175 South Washington Street, MC 6723  
Carbondale, IL 62901

**Business Hours:** Monday-Friday 7:30 a.m. to 4:30 p.m.  
**Phone:** (618) 453-5369

**Faculty and Staff Payroll Deduction Authorization Form: PARKING DECAL(s)**

**\*Completed form with the parking vehicle form(s) must be sent to the parking office via SIU campus mail or in person.**

For the 2026-2027 (July 1, 2026 – August 31, 2027) academic year, SIU Carbondale Parking Division is pleased to offer to eligible employees\* the opportunity to purchase their parking privileges by payroll deduction during the sign-up beginning June 16th through close of business June 26th, 2026. Payroll deductions will be taken beginning in August 2026.

Employees on biweekly payroll will have 8 deductions, semimonthly payroll will have 8 deductions, and monthly payroll will have 4 deductions. *The vehicle registration form is required for each decal you are purchasing.* Payroll deductions may **ONLY** be made for the individual faculty or staff employee of SIU Carbondale.

**Deductions may not be made for one's affiliated spouse or dependent(s)**, as each employee is required to complete his/her own individual form if eligible to participate. Current decals (2025/2026) expire August 31, 2026.

**DECALS WILL BE SENT TO YOUR DEPARTMENT PER THE MAIL CODE YOU PROVIDE.**

*\* Undergraduate and graduate students, RTA's and graduate assistants, adjuncts, extra help and part-time employees with under 50% appointments are not eligible for this payroll deduction.*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Employee Information**

**Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_ **MI:** \_\_\_\_\_

**Dawgtag:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Mail Code:** \_\_\_\_\_

**Payroll Type:** \_\_\_\_\_

*Select your pay period. Paid Monthly (4 deductions), Paid Semi-monthly (8 deductions), Paid Bi-weekly (8 deductions).*

**Salary Range:** \_\_\_\_\_ **Decal Level:** \_\_\_\_\_

*Your decal level is determined by your salary range. Please make sure to select the correct range.*

**Number of additional decals, if needed (\$15.00 each):** \_\_\_\_\_ ( \_\_\_\_\_ )

**Grand Total** (decal amount + additional decal amount): \_\_\_\_\_

**Parking Office Use Only**

Total deduction amount (\$ \_\_\_\_\_ ) to be split over 4 or 8 periods, as applicable.

**Internal Revocation:**

*Please stop payroll deduction upon receipt of this form.*

**Parking Office Staff Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_