



Parking Ticket Appeal Form

INFORMATION

Complainant's Name _____
Last First Middle Initial

Student Campus Address _____ Student I.D. # _____ Date _____

Faculty/Staff Department _____ Phone Number _____ Date _____

Visitor Address _____ Phone Number _____ Date _____

PERMIT INFORMATION *(check appropriate box and write in permit number)*

Red Student Permit # _____ Gray Student Permit # _____ Faculty/Staff Permit # _____ Not registered

TICKET(S) NUMBER(S) BEING APPEALED

Ticket # _____ Ticket # _____ Ticket # _____ Ticket # _____ Ticket # _____

Reason for appeal(s)

Signature _____ Date _____

APPEALS PROCESS ONLY

Step One: Director of Security Recommendations:

Step Two: Appeals Committee Member Recommendations:

Appeals Status:	Pay	Waive	Other	
Faculty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Student	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

The Office of Safety and Security will utilize a two-step appeals process.
 Step #1: The recipient of a ticket can appeal to the director of security. If the recipient of a ticket feels that she/he wants to appeal that decision, the ticket will then be passed to the Appeals Committee.
 Step #2: The decisions of the Appeals Committee are final and non-negotiable. You will be notified of the status of the ticket.