



**PARKING & TRAFFIC VIOLATION  
CITATION APPEALS BOARD**  
**APPEALS MUST BE WITHIN (10) DAYS OF TICKET DATE**



Name: \_\_\_\_\_ Student I.D. \_\_\_\_\_

Dorm and Room #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Citation #: \_\_\_\_\_ Parking Permit#: \_\_\_\_\_

**Reason For Appeal:**

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**OFFICE USE ONLY**

Number of Citations this Year: \_\_\_\_\_ Number of Citations this Term: \_\_\_\_\_

Number of Citations to Date: \_\_\_\_\_ Most Prevalent Violations: \_\_\_\_\_

APPEALS BOARD DECISION:      GRANTED      DENIED      DATE:

NOTES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_