

PARKING VIOLATION APPEAL

_____	_____	_____
Appellant Name	SSU ID #	Parking Permit #
_____	_____	_____
Address	City	State Zip
_____	_____	_____
E-Mail Address	Telephone Number	

Reason(s) for appeal of Parking Violation -- Ticket Number _____ (attach ticket copy)

Attach additional sheet or documentation, if necessary. For information regarding Shawnee State University Parking Policy and Violation Appeal Process, go to <http://www.shawnee.edu/off/sec/parking>.

I do not wish to make a personal appearance at the Parking Appeals Committee Meeting
 I wish to make a personal appearance at the Parking Appeals Committee Meeting

Signature _____ Date: _____

Do not write below this line

Forward signed form to SSU Security Department

PARKING REVIEW APPEAL COMMITTEE:

Additional Information / Other Violations and/or Appeals:

Initial Decision Box / Indicate Fine Amount:

Approved The Parking Appeals Committee has voided the violation and waived the fine.
This decision does not necessarily indicate that the violation was issued in error.

Denied The Parking Appeals Committee finds the appellant in violation of the University
Parking Regulations.

FINE AMOUNT: \$ _____ Date _____ (due within 2 weeks from date indicated)

Comments: _____
