



Received by: _____

Date received: _____

PARKING CITATION APPEAL FORM

NOTICE: All persons have the right to appeal any parking citation within **five (5)** working days of the initial citation date. To file an appeal, complete this form, attach a **copy** of the citations(s), and submit to Devin Stroman, Assistant Vice President of Student Affairs. Incomplete or illegible forms **cannot** be processed and will be grounds for immediate denial. **NOTE:** **The following are unacceptable grounds for appeal:** unaware of the rules, forgetfulness, parking only for a short period, failure to or improper display of a parking permit, failure to notice signs. Please refer questions to *Motor Vehicle Regulations* information located at various locations on campus as well as on the website homepage (www.roswell.enmu.edu).

Name: _____

Date: _____

Address: _____

City/State/Zip: _____

Phone #: _____

Faculty/Staff/Student ID: _____

License Plate # & State: _____

Parking Permit #: _____

Citation #: _____

Date of Citation: _____

Citation Location: _____

Amount Paid: \$ _____

Date Paid: _____

Reason(s) for appeal: _____

Signature of Appellant x _____

For Office Use Only

Priors: YES NO Violations: _____

Appeal: APPROVED DENIED Comments: _____

Signature: _____ Title: _____ Date: _____