UNIVERSITY POLICE DEPARTMENT
PARKING VIOLATION-APPEAL FORM
STUDENT

	$10 Late Fee
	Pharmacy Student
	Other

It is important to understand that if your appeal is denied you have 30 calendar days from the hearing date to pay the balance owed. If citation is not paid within the 30 calendar days, a late fee of $20.00 will be added to your fine. Submit this form to Dean of Students SUB room 306.

All correspondence will be sent to the email address related to your school records.

PLEASE PRINT CLEARLY: Form must be filled out completely.

Today's Date: _____ K# _____
(or social security number)

Name: _____
First Last

Contact phone number: _____

Email Address: _____

(ONLY REQUIRED FOR PHARMACY SCHOOL & ACADEMY STUDENTS)

Date Citation was Issued: _____

Citation Number: _____

Specify reason for making an appeal: **Submit one form PER violation**
Signature