



SAFETY/SECURITY DEPARTMENT

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: \_\_\_\_\_