The University of Tulsa Department of Campus Security

Traffic and Parking Appeals Form

PART 1

NOTICE: The completed Appeals form must be received at the Department of Campus Security Office within ten (10) business days from the date of the citation.

Identification Number		**? Student**	**? Faculty/Staff**	
		? Other:_____		
Name **(Last)**		**(First)**	**(Middle)**	
Home Address		**City**	**State**	**Zip Code**
Campus Address				**Campus Ext.**
E-Mail Address		**Contact Phone Number**	**? Cell** **? Home**	

Vehicle Year	Vehicle Make	Permit No.	License No.	State

Date of Citation	Citation Number	Violation

In the space provided below state the ground(s) upon which you are appealing the citation. Include any pertinent facts and documentation that will support your position. If more space is needed for further explanation or a diagram is needed you may attach additional sheets of paper.

I hereby acknowledge that the above statement and any accompanying evidence are true and accurate.

_____ _____

Signature **Date**

Do Not Write Below This Line

Date Appeal Received at Security Office: _____ **Within 10 Days ? Yes ? No**

Parking Appeals Officer: _____ **Date Reviewed: _____**

Disposition: ? Citation upheld ? Citation Dismissed ? Fine is modified to _____

The University of Tulsa Department of Campus Security

Traffic and Parking Appeals Form

PART 2

NOTICE: This form is only to be completed if you receive an unfavorable decision by the Appeals Officer and you wish to appeal that decision to the Traffic and Parking Appeals Board. This form, along with your original appeal form, the Appeals Officer decision letter and a paid receipt from The University of Tulsa Business Office must be submitted to The Department of Campus Security Office within ten (10) business days.

Identification Number	**? Student ? Faculty/Staff** **? Other:_____**
Name (Last) (First) (Middle)	

? **I wish to appeal the decision of the Appeals Officer to the Traffic and Parking Appeals Board. I will <u>not</u> appear in person before the committee and understand that the board's decision will be based upon the written documentation that I have submitted.**

? **I wish to appeal the decision of the Appeals Officer to the Traffic and Parking Appeals Board. I wish to personally appear at this hearing and present my appeal to the committee.**

_____ _____

Signature **Date**

Do Not Write Below This Line

Date Appeal Received at Security Office: _____ Within 10 Days ? Yes ? No

? Appeals Form (Part 1) Attached ? Appeals Officer Decision Letter Attached ? Paid Receipt Attached

Traffic and Parking Appeals Board Review

On _____ The University of Tulsa Traffic and Parking Appeals Board reviewed the facts and evidence submitted with this appeal and found that;

? **There was sufficient evidence to justify a reasonable conclusion that the appellant committed a violation of The University of Tulsa's Traffic and Parking Regulations.**

? **There was sufficient evidence to justify a reasonable conclusion that the appellant committed a violation of The University of Tulsa's Traffic and Parking Regulations but based on extenuating circumstances the fine has been modified to _____**

? **There was insufficient evidence to prove that the appellant committed a violation of The University of Tulsa's Traffic and Parking Regulations and the citation is dismissed and expunged from the appellant's parking record.**

Comments: _____

_____

_____ _____

Signature of Chairperson **Date**