

Angelo State University  
Police Department

**TRAFFIC APPEAL APPLICATION**

**Part I**

**This is my request to appear before the Campus Traffic Appeals Committee regarding the parking citation(s) I received while parked on University property.**

[ The person requesting an appeal must be the person charged with the violation and must present a picture ID at the time of filing this request.]

|                          |          |                |
|--------------------------|----------|----------------|
| Name of Person to Appear | Address  | Phone #        |
| Violation                | Permit # | Amount of Fine |

***I agree to appear before the Traffic Appeals Committee on the following date:***

\_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_ o'clock.

***I understand that my failure to appear at the date and time indicated above will result in the automatic denial of my appeal. I furthermore agree to pay the fee for the violation should I fail to appear. I agree to provide the committee with a reasonable notice should I be unable to appear before the committee. I fully understand that, if I am a student, during my appearance before the Traffic Appeals Committee the University's Code of Student Conduct will be in full effect.***

***I am requesting to waive my right to appear before the committee.*** \_\_\_\_\_  
Initial

\_\_\_\_\_  
Signature Date  
[Please Complete Part II Of This Form On The Back of Application]

**For Office Use Only**

Parking Citation # \_\_\_\_\_ License Plate # \_\_\_\_\_

Committee Members Present:

\_\_\_\_\_  
\_\_\_\_\_

Decision of Committee:  
Circle One

Approved Denied Failed To Appear

( Please Return Application To University Police After Hearing)

