

**Cedarville University Campus Safety  
Parking & Traffic Ticket Appeal**

FOR OFFICE USE ONLY		Last Name:(PLEASE PRINT)
Hearing Date: _____		
Decision: _____		
<input type="checkbox"/> upheld	<input type="checkbox"/> overturned	

NAME	ID #:	TODAY'S DATE
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REGISTRANT'S NAME (If different from above): \_\_\_\_\_

ADDRESS: (Resident students include dorm & room #)  
\_\_\_\_\_

YEAR	<input type="checkbox"/> FR	<input type="checkbox"/> SO	P. O. Box #	Permit #:	Ticket #:
	<input type="checkbox"/> JR	<input type="checkbox"/> SR			

Location and type of violation:  
\_\_\_\_\_



**IMPORTANT NOTICE:**

ALL APPEALS **MUST** BE MADE WITHIN 10 DAYS OF THE DATE OF THE TICKET. APPEALS MADE AFTER THE 10 DAYS WILL NOT BE CONSIDERED. UNDATED APPEALS MAY NOT BE CONSIDERED.

ALL APPEALS **MUST** BE INITIATED AT THE OFFICE OF CAMPUS SAFETY. IF AN APPEAL IS DENIED AFTER REVIEW BY CAMPUS SAFETY, IT WILL BE FORWARDED TO STUDENT COURT. STUDENT COURT WILL NOTIFY THE APPELANT REGARDING THE DATE AND TIME OF THEIR HEARING.



**APPEALS WHICH ARE SELDOM GRANTED:**

LACK OF KNOWLEDGE OF THE REGULATIONS  
FORGETFULNESS  
FAILURE TO FOLLOW POSTED SIGNS

INABILITY TO FIND A LEGALLY MARKED SPACE  
PARKING IN A RESERVED OR RESTRICTED SPACE  
PARKING IN A HANDICAP SPACE WITH NO PERMIT

REASON FOR APPEAL: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I do  I do not want my appeal forwarded to student court for a hearing.

**I do hereby affirm that this statement is true and accurate to the best of my knowledge.**

Appellant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

FOR OFFICE USE ONLY	# OF PREVIOUS TICKETS: _____
PREVIOUS VIOLATIONS:	
1 _____	5 _____
2 _____	6 _____
3 _____	7 _____
4 _____	8 _____

DISPOSITION:	<input type="checkbox"/> Appeal denied, fine upheld.	<input type="checkbox"/> Appeal forwarded to Student Court
	<input type="checkbox"/> Appeal denied:	Date E-mailed: _____ / _____ / _____
	<input type="checkbox"/> Fine reduced to:	Date Forwarded: _____ / _____ / _____
	<input type="checkbox"/> Fine Waived - No Charge	<input type="checkbox"/> Appeal granted
		Date E-mailed: _____ / _____ / _____

REMARKS: \_\_\_\_\_

Place additional comments on back of this form.