



# PARKING TICKET APPEAL FORM

Name: \_\_\_\_\_ Student ID # (If Applicable): \_\_\_\_\_

Telephone #. \_\_\_\_\_ Email: \_\_\_\_\_

Violation # \_\_\_\_\_ Date of Issue: \_\_\_\_\_

Please explain your reason for appeal in the space provided below; additional pages may be stapled to this sheet:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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I affirm that the above statement is true and accurate to the best of my knowledge.

Signature. \_\_\_\_\_ Date: \_\_\_\_\_

Print Name. \_\_\_\_\_

**This form must be returned to the Regis College Police Department within 10 days after the issuance of the violation:**

Regis College Police Department

College Hall Room 102

235 Wellesley Street Weston, MA 02493

email: campuspolice@regiscollege.edu

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OFFICE USE ONLY:

Appeal Date/Location: \_\_\_\_\_

Appeal Denied \_\_\_\_\_

Appeal Upheld \_\_\_\_\_

Amount Owed: \_\_\_\_\_