

**Shippensburg University
Parking Citation - Appeal Form**

TO: Shippensburg University Police Dept.
153 Allegheny Dr.
Shippensburg PA
17257
police@ship.edu

FROM: Name: _____
Address _____
Phone: _____
Email: _____
SU ID # _____

Vehicle Information:

License Plate Number: _____ State: _____ Hangtag Number: _____

Hangtag Classification:

- | | | |
|---|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> Employee | <input type="checkbox"/> EMT | <input type="checkbox"/> Resident |
| <input type="checkbox"/> Res. Student | <input type="checkbox"/> Contractor | <input type="checkbox"/> Purple Heart |
| <input type="checkbox"/> Storage/Commuter | <input type="checkbox"/> Visitor | <input type="checkbox"/> Other |

Citation Information

Citation #: _____ Date Issued*: _____
Violation: _____ Location: _____

*All appeals must be submitted on this official form to the Public Safety Department within five (5) calendar days of date issued.

The following reasons are not considered sufficient grounds for an appeal:

- Forgetfulness
- Failure to display permit
- Unavailability of parking spaces
- Short parking duration
- Inability to see the signs
- Insufficient funding to pay ticket

Level 1 Appeal

Please print or type the nature of your appeal. Be specific and include diagrams or other supportive information to explain the reason for your appeal. Use additional paper if necessary.

Signature: _____ Date: _____

OFFICE USE ONLY:

Level 1 Appeal - Decision

Date received _____ Appeal: Granted Denied

Signature of Chief of Police: Basis _____

for the Decision:

The Parking Committee Chairperson must receive the appeal within ten (10) days of Level 1 appeal decision.

**Shippensburg University
Parking Citation - Appeal Form**

Level 2 Appeal

Please print or type the nature of your appeal. Be specific and include diagrams or other supportive information to explain the reason for your appeal. Use additional paper if necessary.

Signature: _____

Date: _____

OFFICE USE ONLY:

Level 2 Appeal – Final Decision

Date received _____ Appeal: Granted Denied |

Signature of Parking Committee _____

Chair: Basis for the Decision: _____

THE DECISION OF THE PARKING COMMITTEE IS FINAL