TOUGALOO COLLEGE
TRAFFIC CITATION APPEAL FORM

PLEASE READ CAREFULLY BEFORE COMPLETING

1. This form must be completed and **returned to Jamerson Hall** within ten (10) days from the date the citation was issued.
2. Along with reason for appeal, a diagram describing details of the appeal may be drawn on the back of this appeal form. It may include: street name, building name, and directions. (Attach any appropriate documentation to support your appeal).
3. The Traffic Committee will review your appeal request. You will have the right to appear before the committee.
4. A written decision will be sent to you.
5. A copy of your ticket **must** be attached to this appeal form.

PLEASE PRINT NEATLY

NAME:_____
First Middle Last

ADDRESS:_____ Telephone Number _____
(Campus, Local P.O. Box or Street Address) Cell Phone Number_____

_____ TC email: _____@tougaloo.edu
City State Zip

REASON FOR APPEAL: _____

_____

_____

_____

(Attach a separate sheet if necessary)

Date of ticket: _____ Citation (ticket) number:_____

OFFICE USE ONLY CASE # _____ Appeal taken by _____ Date _____

YOUR APPEAL WAS REVIEWED ON_____ AND THE DISPOSITION IS AS FOLLOWS:

- ☐ Your appeal has been approved by the Traffic Committee and your ticket has been voided.
- ☐ Your appeal has been denied by the Traffic Committee for the following reason (s):

_____
_____
_____

If your appeal has been denied, the amount listed below is reflected on your account.

$ _____ Total Traffic Fine

Parking rules can be found online at www.tougaloo.edu/content/studentlife/studenthandbook.pdf