



Auxiliary Services Parking Citation Appeal Form

Instructions: Complete the form below and submit to parkingservices@asurams.edu. All appeals must be submitted within five business days from the date the citation was issued. Payment and late fees are suspended during the appeal process. If you file an appeal, you will be notified by e-mail when a decision has been rendered. You must submit one form per citation.

DATE: _____ RAM ID: _____

NAME: _____

MAILING ADDRESS: _____ CITY/STATE/ZIP: _____

CELL PHONE: _____ ALTERNATE PHONE: _____

ASU EMAIL: _____

PERSONAL EMAIL: _____

CITATION INFORMATION:

CITATION NUMBER: _____ DATE OF VIOLATION: _____

REASON FOR VIOLATION: _____

WAS YOUR VEHICLE TICKETED OR TOWED? TICKETED TOWED

THE FOLLOWING REASONS ARE NOT GROUNDS FOR AN APPEAL:

- LACK OF KNOWLEDGE OF ASU PARKING RULES
- LATE TO CLASS OR APPOINTMENT
- INABILITY TO FIND A LEGAL PARKING SPACE/PARKING IN UNAUTHORIZED SPACES
 - TO INCLUDE PARKING IN HANDICAP SPACES WITHOUT PROPER LEGAL REGISTRATION

REASON FOR APPEAL: (USE THE BACK OR ATTACH ADDITIONAL PAGES IF NECESSARY)

By signing/typing my name below, I hereby acknowledge that all information provided above is correct. I further understand that should my appeal be denied, I am responsible for the charge(s) associated with the citation listed above.

All personal data and special categories of sensitive personal data collected or processed by Albany State University (ASU) must comply with the ASU Cybersecurity Program Plan, as authorized by the Board of Regents Policy Manual Section 10.4 Cybersecurity: <https://www.usg.edu/policies>. Anyone suspecting his or her sensitive personal data has been exposed to unauthorized access, report your suspicion to LegalAffairs@asurams.edu. Otherwise, questions concerning GDPR can be forwarded to LegalAffairs@asurams.edu. By typing/signing my name in the box below and submission of this form/application provides consent to and acknowledgment of the ASU Data Security and Privacy Policy.

Signature: _____ Date: _____

PARKING PERSONNEL ONLY:

Appeal Decision: Approved Denied

Signature: _____ Date: _____