

STANWOOD HIGH SCHOOL

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PARKING TICKET APPEAL FORM

Students may appeal a parking ticket if they feel it was issued in error or they have extenuating circumstances. To appeal a parking ticket, a student must complete this form and attach the ticket to the form. Forms must be submitted within 5 school days of receiving the ticket.

Student Name:			Grade Level:	
Vehicle Informatio				
Year: Ma	ke/Model:	Color:	License Plate No): <u> </u>
If Yes, what is your	Permit Number and	or the current school year? I Color?Red Green te lower left corner on the driv	YES NO Permit #: vers' side of the windshield?	 YES NO
Where was the Par	king Ticket issued (v	vhich Parking lot)?		
Why did you receiv	·			
Why should this tic	cket be waived? Wha	at are the extenuating circu	mstances?	
What will you do d	ifferently to avoid a	ticket like this in the future	?	
I have honestly and I was not truthful o	•	s, and understand that my a	appeal will be denied if it is d	etermined that
Student Signature:			Date:	
		For Office Use Only		
Appeal Outcome:	Ticket Waived	Ticket Reduced to:	Permit V Ticket Upheld	'erified: