



TRAFFIC REGULATIONS APPEALS PROCESS

Wichita State University Police Department

It is the responsibility of each member of the university community to learn and abide by the WSU Traffic Regulations. The Fine Schedule for violations is set by K.S.A. 8-2118

The University Traffic Appeals Committee will decide your appeal based solely upon your written statement, unless you appear in person to provide additional information. The information below will be used to notify you of the appeals decision. **A \$10.00 administrative fee will be assessed if you request to appear in front of the Traffic Appeals Committee and fail to appear without 24-hour notice to the Traffic Appeals Committee. To cancel your appearance with the Traffic Appeals Committee you must e-mail trafficappeals@wichita.edu or call the Chairperson at 316-978-5279. A \$5.00 administrative fee, per ticket, will be assessed for unsuccessful appeals.**

Instructions: Appeals must be filed within **20 DAYS** after issuance of ticket. Complete the form below and indicate if you will appear in person. Send the appeal form and a copy of your ticket to the WSU Student Advocate at Campus Box 56, regardless if you are a student, faculty or staff. You will be contacted by e-mail with the decision within 3 days of the Traffic Appeals Committee meeting.

Appellant Information *Please type your appeal or PRINT CLEARLY and include all information requested*

Last Name	First	MI	Address	City	State	Zip
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MY WSU ID	Telephone	WSU e-Mail	Ticket Number	Ticket Date
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CHECK ONE: Written Appeal In Person Appeal

On the reverse side of this form, please explain the reasons for your appeal. Include the relevant facts, applicable portions of WSU Traffic Regulations and extenuating or mitigating circumstance. Students needing assistance in preparing this Traffic Appeal may contact the Office of the Student Advocate in Room 219J in the Rhatigan Student Center, 316-978-3026.

I certify that I have read the above information and that I fully understand my rights and responsibilities in the appeal process.
I affirm my written statements are true.

Signed _____ Date _____

Type or write your appeal on the back of this form. Do not write below this line. For office use only.

Decision of the Traffic Appeals Committee

Appeal Date _____ Ticket Upheld _____ Ticket Dismissed _____

Fine Sustained for \$ _____ Fine Cancelled _____ Case Continued Until _____ Other _____

Appeals Committee Chairperson Date

REASON FOR APPEAL: *Please type your appeal or PRINT CLEARLY*