



PARKING TICKET APPEAL FORM

Boulder High School
1604 Arapahoe Ave.
Boulder, CO 80302
P: (303) 442-2430
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<http://schools.bvsd.org/boulderhigh>

For office Use Only

ALT Date _____

Submit _____

Approved _____

Denied _____

This form should be used to appeal a parking ticket received in the Boulder High School parking lot.

You **MUST INCLUDE** the following with this appeal form:

- A PHOTOCOPY of your school parking permit.
- A PHOTOCOPY of the ticket.
- Valid proof of vehicle registration of the vehicle that was ticketed.
- Any other supporting evidence that reinforces your appeal.

You may only use one waiver per school year. If you have previously received a waiver for a parking ticket, your request will be denied.

Instructions: **PLEASE PRINT CLEARLY!** Students must pick up appeal results one month after the appeal was submitted. We will not consider appeals that are illegible or incomplete.

NAME _____

PHONE _____

EMAIL _____

MAILING ADDRESS _____

CITY/STATE/ZIP _____

LICENSE PLATE # _____

DATE OF PARKING TICKET _____

Reason for Appeal (YOUR DISSATISFACTION ABOUT RECEIVING A TICKET, BY ITSELF, IS NOT SUFFICIENT REASON TO APPEAL THE TICKET):
