

CITATION NUMBER: _____



*Grayson County College
Campus Police
6101 Grayson Drive
Denison, Texas 75020-8299
(903) 463-8619*

REQUEST FOR REVIEW/APPEAL OF PARKING CITATION

Name: _____ SSN: _____

Address: _____ Phone#: _____

City, State, Zip: _____

I request review/appeal of the above parking citation based upon the following information:

I swear the above to be true and correct to the best of my knowledge or recollection.

Signature: _____ Date Submitted: _____

Notice of Governmental Document-False statements submitted may be subject to state criminal penalties for perjury.

Campus Police Action: Probated To: _____

Approved with conditions: _____

Disapproved: _____