



FLORIDA STATE UNIVERSITY
TRANSPORTATION SERVICES

TRANSPORTATION SERVICES VIOLATIONS APPEALS BOARD

Important: Please fill out this form and send to tvab@fsu.edu to schedule a hearing.

Name: _____ EMPLID: _____

License Plate Number: _____ Citation(s): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Requests for continuances of the scheduled hearing date are discouraged, but will be granted ONCE upon notification of extenuating circumstances at least 48 hours prior to the scheduled hearing time. Persons failing to obtain a continuance and/or failing to appear for their scheduled hearing will forfeit their right to any further consideration. Their appeal will be adjudicated as upheld on the record of the Transportation Violations Appeals Board.

Hearing Date: _____ Time: _____ **Note:** All hearings will take place in the Student Union.

Reason for further appeal: _____

I have read the above and agree to appear before the Florida State University Transportation Violations Appeals Board at the time scheduled above.

Signature: _____ Date: _____

Decision of the Board: Dismissed Upheld Upheld/Reduced to: _____

All fines become delinquent after: _____

Additional Comments: _____

Chairperson Signature: _____