

Damage & Fine Appeals Form

Resident Name	Sam ID	Today's Date		
Campus Address:				
Hall / House / Apartment:	Room / Apt. Number	r		
Current Mailing Address:				
Street Address:				
City, State, Zip Code:				
Phone Number:				
Please Be Specific:				
Damages You Are Contesting:				
Total Amount of Charges:	Amount of Charges Being Contested	d:		
Explain in detail why you are appealing these damage charges.				

Please continue on back of form if necessary. If you are not claiming responsibility for these charges, please attach a signed letter from the responsible person(s) including their sam id number, current address and telephone number.

I do hereby certify that the information provided above is correct. I also understand that providing false information is a violation of Sam Houston State University Code of Student Conduct and may result in further disciplinary action. If the damage appeal is not approved, you may appeal the decision to the Student Discipline Coordinator or his/her appointee within ten days of the Residence Hall Director's decision.

Do Not Write Below This Line:

Residence Hall Director Appeal Information:

□ Approved	□ Adjusted	Denied	Staff Signature:	
Today's Date:		Date Letter Mailed: _		Copied To:
Comments:				
Amount of Charge(s) Removed:			Accounting Clerk Initials:

Assistant Director Appeal Information:

□ Approved	□ Adjusted	Denied	Staff Signature:	
Today's Date:		Date Letter Mailed:		Copied to:
Comments:				
Amount of Charge	e(s) Removed:			Accounting Clerk Initials: