Paratransit Service
Dept. 4313 • 1000 E. University Ave. • Laramie, WY 82071
Phone (307) 766-9800 • Fax (307) 766-9804 • Email: tppara@uwyo.edu ● Website: www.uwyo.edu/paratransit

REQUEST FOR EXCUSED NO-SHOW

REQUEST PROCESS (Please print legibly)

1. "No-shows" occur when a rider cannot be located at the scheduled pick-up location, or when a rider cancels a trip one (1) hour or less prior to their scheduled "ready time".
2. Complete all sections of this form. It is important that the information provided is complete and accurate.
3. Provide specific information on the date, time, dispatcher on duty and additional information when the trip bookings were made, change, or cancelled.
4. Please include any supporting documentation; such as maps, drawing, and pictures. Additional pages may be added.
5. This form must be postmarked or received in the UW Transportation Services office within 7 days of the no-show in question.
6. Submit in any of the following ways:

Mailed to:	Emailed to:	Faxed to:
UW Transportation Services Dept. 4313 1000 E. University Ave. Laramie, WY 82071	tppara@uwyo.edu	(307) 766-9804

Notification of the decision will be sent to the address provided by the rider.

Reason for request:

☐ No-show was a result of an error on behalf of UW Transportation Services
☐ No-show was a result of something beyond the rider's control
☐ Other

Date of No-Show: Click here to enter a date. Time of No-Show: Click here to enter time.

In as much detail as possible please explain why the no-show trip should be excused.

Click here to enter reason for request.

I understand that falsifying information in this request will result in denial of the request and may subject me to disciplinary action. I further attest all information given is true, correct, and valid to the best of my knowledge and belief. After considering all of the facts relating to the citation, I believe I have a fair just reason for requesting an excused no-show.

Click here to enter name. Click here to enter phone number.
(Full Name) (Phone Number)

Click here to enter address. Click here to enter City, State, Zip. Click here to enter email.
(Street Address/PO Box) (City, State, Zip) (Email)

Click here to enter a date.
(Signature) (Date)

Official Use Only

Received:	Letter Sent:
Approved: ☐	Denied: ☐