

Resolution:

Date, signature

RSU **Department of Human Physiology and Biochemistry**

Name of the department this complaint is addressed to

Prof. Pēterim Tretjakovam

Name, surname of the person you are addressing this complaint to

STUDENT COMPLAINT / ACADEMIC APPEALS FORM

STUDENT INFORMATION

Name, Surname: **James Jones**Student card No.: **21-123456**Study programme: **Medicine**Study year: **1**Semester: **1**Group: **1**E-mail: **123456@rsu.edu.lv**Phone No.: **+371 1234567**Address: **Dzirčiema street 16, Riga**
☐ COMPLAINT ☒ **ACADEMIC APPEAL**

(Describe your application as much in detail as possible, stating your request at the end.)

- What kind of assessment was it: colloquium, test, exam;
- In what subject;
- When did you write it;
- Name, Surname of the teacher;
- Was this first, second or third time you wrote the assessment;
- When did you get the grade;
- What grade did you get;
- What do you think was not appropriate;
- What do you want to achieve with this Appeal (for example: another teacher to look over your work, another grade).

Signature

J.Jones

Date

01.01.2021.

Upon completion, please submit this form to the Student Services in RSU Main building, 16 Dzirciema Street, Block K, Room 100.

Received at RSU Student Services

For office use only:

Data received

Name of recipient

Response date

Signature