Your address

Your phone number

 Your email address

Date

Name of addressee

Position of addressee

Name of College

Address

Dear Mr/Ms…..,

***Re: Intimation of intention to appeal***

I write to notify you of my intention to appeal against the decision to (insert decision being appealed against). I was advised of this decision on (date).

The grounds for my appeal are unfair or defective procedure / failure to take account of medical or other adverse personal circumstances / medical or other adverse personal circumstances which have not previously been presented. (delete as applicable)

I will submit my formal appeal letter within the next 20 working days, as stipulated in the current University Calendar.

Yours sincerely

Your name

Student ID number

Degree course of study