UNIVERSITY OF CHEMISTRY AND TECHNOLOGY PRAGUE

Appeal against a Decision on fees related to studies in a foreign language (hereineafter referred to as "Decision")

Surname, name: …….. Date of birth: ……..

Contact address: ……..

Reference No. of the Decision: …… dated: ……..

Faculty: …….. Year of study: ……Study sub-programme: ……..

Hereby I appeal against the Decision and I request (mark the applicable option):

□ **waiver of the fee** □ **reduction of the fee** □ **deferral of the fee** □ **division of the fee in several payments**

For the following reasons (mark the applicable option):
□ extraordinary difficult social, health or family situation (brief reason needs to be documented by e.g. a medical report, confirmation of receipt of social benefits, death certificate in case of parent´s death, etc.)
□ receipt of social scholarship or scholarship to a student studying in a foreign language in order to support study in the Czech Republic (to be documented by the faculty´s or Department of International Relations´relevant decision)
□ extraordinary professional or social representation of UCT Prague (to be documented by confirmation by the faculty)
□ payment of fee for study in a language and professional preparatory programme within lifelong learning preparing for study in study programmes accredited at UCT Prague in this academic year
□ other extraordinary reasons (describe below)

Attached documents:

Date: …….. Student´s signature: ……

Dean´s recommendation in the matter:

□ I recommend to charge the assessed fee

□ I recommend to waive the fee

□ I recommend to reduce the fee to: ……

□ I recommend to defer the fee until: ……

□ I recommend to divide the fee in the following payments:……..

Date: …… Dean´s signature: ……..

Rector´s decision in the matter:

Date: …… Rector´s signature: ……..