

APPEAL AGAINST DEAN'S DECISION CONCERNING THE DENIAL OF ADMISSION TO STUDY

Identification data:	Name:	Surname:
	Faculty:	Application number:
	Study programme:	
	Study plan/plans:	
	Form of study: full-time combined	
	Type of study programme: ☐ bachelor ☐ master ☐ follow-up master	
	Contact address including zip code:	
	Please provide the contact address only if it differs from the contact address in the online application	
Description of the decision on the denial of admission:	Reference number:	
	Academic year:	
	I appeal against the decision on non-admission for the purpose specified in Section 50 (6) of Act No. 111/1998 Coll. on Higher Education Institutions and on Amendments and Supplements to some other Acts.	
Grounds for appeal (clearly specify the reasons of your appeal):	Fill in:	
Appeal Attachments:	I enclose these documents, which could help the Rector's decisions under Sections 49 and 50 of Act No. 111/1998 Coll. on Higher Education Institutions and on Amendments and Supplements to some other Acts.	
	Specify:	
	Date: Signa	ature: