

Dnr:

To be sent to:

Scanned and sent via email to: studierektor@english.su.se OR
Via mail to: Department of English, attn: Director of Studies (UGA), Stockholm University, 106 91 Stockholm.

Request for a review of grade		
	r Education Ordinance, you cannot appea t a review of your grade. The review is do	
	w of your grade, please fill in the informa in detail the specific reason(s) for your re y or grading criteria.	
Name	Perso	onal identity number
E-mail address	Telep	phone number
Exam/course/module who	ose grade is requested to be reviewed:	
Course/module name:		
Course code:		
Examination:		(e.g. written exam/essay/etc.)
Examiner/teacher:		
Motivation for review:		
Date		