

# Appeal Against Unfair Treatment

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Recipient's Name]

[Title]

[University Name]

[University Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally appeal against the treatment I have received regarding [specific issue or incident] that occurred on [date]. I believe that the actions taken against me were unjust and do not reflect the values upheld by [University Name].

On [date], [describe the incident or treatment in detail, including any relevant facts, names of individuals involved, and specific policies that were violated]. As a result of this situation, I have faced [explain the negative consequences or impact it has had on your academic or personal life].

I would like to request a review of this matter, as I am confident that upon reassessment, my position will be seen in a different light, justifying a reconsideration of the decision made. I am attaching [any supporting documents, such as emails, reports, or witness statements] to aid in evaluating my appeal.

Thank you for your attention to this matter. I hope for a fair resolution and would appreciate the opportunity to discuss this issue further. Please let me know a convenient time for us to meet or if any additional information is needed.

Sincerely,

[Your Name]

[Your Student ID]