

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]

[Date]  
[Recipient's Name]  
[Title]

[Organization Name]  
[Organization Address]  
[City, State, Zip Code]

Subject: Appeal for UHS Policy

Dear [Recipient's Name],

I hope this letter finds you well. I am writing to formally appeal the decision made regarding [specific policy or decision] under the University Health Services (UHS) policy.

[Briefly explain your situation, including relevant dates and details. Mention any specific policy numbers or titles relevant to your case.]

I believe that [reason for appeal, such as new evidence, misinterpretation of policy, etc.], and I would like to request a review of my case. [Provide any supporting documents or evidence if applicable.] I appreciate your attention to this matter and look forward to your prompt response.

Thank you for considering my appeal.

Sincerely,

[Your Name]  
[Your Student ID (if applicable)]  
[Your Signature (if sending a hard copy)]