



Universidade do Minho
Serviço de Gestão Académica

FORM/REQUEST GRADE IMPROVEMENT (Order RT-03/2020 of 03 January, Article 148)	Received on: ____/____/____ By: _____
---	--

Full name: _____ Degree: _____ Student Number: _____

Request for grade improvement in the academic year ____/____ of the following course unit(s):		
	<i>To be completed by the Services</i>	
	Active (Y/N)?	Academic year of completion
_____	_____	_____/____
_____	_____	_____/____
_____	_____	_____/____
_____	_____	_____/____
_____	_____	_____/____
_____	_____	_____/____

I hereby acknowledge the conditions described in Article 148 of the Order RT-03/2020 of 03 January, which approves the Academic Regulation. University of Minho, _____ Signature: _____

Note: A notification will be sent via Electronic Desk in the Academic Portal upon a decision on this request.