



Appeals Submission Form

Full Name of Candidate	
Email Address	
Date & Time reported to UEMS Office	
Date of Examination	
Examination Component	

I understand that multiple appeals regarding the same examination diet will not be investigated and I confirm that this appeal contains the totality of my grievance from the outset

Nature of appeal:

- Academic Paper
- Clinical Cases
- Overall Assessment
- Endovascular
- Open Technical

Please email this form to: **Secretariat@uemsvascular.com**

On receipt, a payment request for 400.00€ will be sent by email. The formal appeal process will begin after payment has been received.