**Protocol no. :**..……..............

**Egaleo,** …..……..............

**To**: Director of the Master of Science in Artificial Intelligence and Deep Learning

**COMPLAINT FORM**

**Please fill in the following fields.**

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| Full name : |  |
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**Please state briefly and clearly the problem you have encountered or your complaint about the services offered (educational, administrative, etc.), or your objection.**

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**Privacy Update**

**The personal data of students are processed for the purpose of examining the submitted request/complaint, in order to facilitate the student public and to ensure promptness and efficiency in the service of student needs. The University of West Attica takes all necessary measures to protect personal data.**

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* **I understand that the confidentiality of communication will be ensured, as provided for in the Internal Regulations of the University of West Attica and the applicable legislation.**

**Egaleo**, / /\_\_

**The Applicant ………………………..**.................