

Student Grievance Redressal form (UGC)

Shri Kashi Mahavidyalaya, Ramgarhi, Sikandara, Kanpur Dehat, U.P.

Name of the Student	
Roll no. / Registration Number	
Course (Please mention the current semester)	
Mailing Address	
Contact Number	
Email	
Grievances against (Student / Faculty / Staffs / Administrative offices / Senior Officers)	
Details of grievances/complaints With supporting documents if any	
Date and Time	
Signature	

UNDERTAKING

I hereby declare that the information furnished above by me is true and accurate. Further, I understand that disciplinary action can be taken against me if the above allegations are found incorrect or malicious.

Full Signature of the Grievant