

N.V.K.S.D. COLLEGE OF EDUCATION
ATTOOR, KANNIYAKUMARI DIST.

GRIEVANCE FORM

DETAILS OF THE PERSON WHO BRINGS THE GRIEVANCE

Name	:
Course	:
Date of which Grievance is reported	:

PROBLEM FACED

SUGGESTIONS IF ANY

Signature of the person who lodge the grievance

DECISION OF GIREVANCE REDRESSAL CELL

Signature

N.B: Identity revelation is not compulsory