

## Nazir Ajmal Memorial College of Education (B.Ed)

**Grievance Redressal Cell (GRC)** 

## **Grievance Form**

* = Optional
Name * :
Course :
Email ID*: Date of Events occurred :
Name of (Student/Staff/Department/) against whom the complaint is to be lodged *
Name of grievance / in which redressal is sought (Write):
Declaration of Complainant
I / we hereby declare that the above information furnished by me/us is true to the best of my/our knowledge. In case if it is turned false I/we am/are personally responsible for the punishment.
Date:
Place: Signature of Complainant*
Signature of Complainant"

## Note:

- **1.** \* = **Optional**
- 2. Attach the supporting document if any.
- 3. No incomplete / Anonymous grievance will be entertained.
- 4. Complete form must be dropped in the marked "Grievance Box).
- 5. The complainant will be called for inquiry in front of the Grievance Redressal Cell committee as if required.