

SMT. JAWALA DEVI COLLEGE OF EDUCATION, SANGHOL

GRIEVANCE FORM

DATE: _____

NAME: _____

STUDENT ROLL No.: _____

CONTACT INFORMATION: _____

TYPE OF GRIEVANCE: (PLEASE TICK ANY ONE)

- () TEACHING METHODS
- () COURSE CONTENT
- () ASSESMENT AND GRADING
- () COMMUNICATION WITH FACULTY
- () INTERNET ISSUES
- () CLEANLINESS AND MAINTENANCE
- () SAFETY AND SECURITY
- () FOOD QUALITY
- () DISCRIMINATION OR HARASSMENT
- () RAGGING
- OTHER: _____

DETAILS OF THE GRIEVANCE:

STEPS TAKEN TO RESOLVE THE ISSUE (IF ANY):

DESIRED RESOLUTION:

SIGNATURE: _____

DATE: _____

PRINCIPAL