

For students only

TECHNO INSTITUTE OF HIGHER STUDIES

(Affiliated to University of Lucknow, Lucknow)

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Student Grievance Form

1. Student Name: ______ 2. Course: ______ 3. Class: _____ Semester: _____ 4. Session: ______ 5. Mobile/WhatsApp No.: ______ 6. E-mail: 7. Area of Grievance: Academic [] Administrative [] 8. Date of the problem or incident reported: _____/____/ 9. Description of the Problem/Incident: _____ For office use only 10. Has the problem been reported: Yes [] No [] 11. Action taken or Outcome of the Report: ______ 12. Satisfaction of Student: Yes [] No [] 13. Cause of Dissatisfaction: _____ **Student Signature:** Date: ____/20___

Secretory

Grievance Redressal Cell