

ACHIEVERS COLLEGE
OF COMMERCE & MANAGEMENT (NIGHT COLLEGE)
KALYAN

Student Grievance Form

Date of Grievance:- _____

1. Name of the Student:- _____

2. Residential Address:-

2. Roll No:- _____ Class:- _____ Semester:-

3. Mobile No:- _____ Email-ID:- _____

4. Nature of Grievance:- _____

a. ☐ Teaching

b. ☐ Administrative

c. ☐ Examination

d. ☐ Infrastructure

e. ☐ Other

5. Description of Grievance :-

6. Has the problem been reported earlier: - Yes ☐ No ☐

Student Signature:- _____

Note : Please take printout of this form and drop it in the Complaint Box.

“Jatayu” Helpline No:- 7566680009