GRIEVANCE REDRESSAL CELL (GRC)

FORMAT FOR FILING A COMPLAINT AGAINST ANY FORM OF GRIEVANCE FOR STAKEHOLDERS

I. Details of the Complainant(s):

Name (In capital letters)					
Age					
Gender	Male: [] Fem	ale: []	(Please tick)
Category	GEN:	ST:	OBC:	SC:	(Please tick)
Whether Student or Employee					
Department/ Class / Office					
Contact Address					
Mobile Number					
Email					

II. Person(s) against whom the complaint is being lodged:

Name (In capital letters)	
Department/ Class / Office	
Contact Address (OPTIONAL)	
Mobile Number (OPTIONAL)	
Email (OPTIONAL)	

III. Brief description of the complaint (in English / Bengali / Hindi):

IV. Any other relevant information:

Date:

Place:_____