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GRIEVANCE REDRESSAL FORM (A.Y.2024-25)

Name of the Student			
Academic Year		Semester	
Class		Specialization	
Nature of Grievance (Brief Description)			
Signature of the Student		Date	
Grievance Redressal			
Investigation Done By (Name of the Faculty Member)			
Findings (In Brief)			
Corrective Action Taken/Suggested			
Signature of the Investigator			
Name of the Grievance Redressal Committee Member	Signature		



A/p- Loni Bk, Tal-Rahata, Dist.- Ahmednagar Pin-413736. Maharashtra (India)

