

CHRIST COLLEGE - PUNE
Student Grievance Redressal Form (General)

Grievant Information

Student's Name:..... Mobile: _____

Fathers/Guardian's Name..... Mobile _____

Residential Address _____

Class: Div./Section: Roll No/Student ID ...

Email ID

Permanent Address: _____

Nature of Grievance: Academic /Administrative /other _____

Date, Time and place of event leading to grievance: _____

Grievance Details _____

State Policies, guidelines or procedures you think have been violated

Proposed solution to grievance

State why do you think an informal resolution is not possible

The information that I am submitting here is factual and without any exaggeration

Signature ----- (signature of the student)

Note: Fill all the necessary details in the form send it to grievance@christcollegepune.org attach the necessary document sand submit the hard copy to college office