Darjeeling Government College

Unveiling the Silence

Grievance Form

COMPLAINANT INFORMATION

1. Name: _____
2. Gender (Male/Female/Other):_____
3. Department: _____
4. Semester: _____
5. Roll No._____
6. Contact Number: _____
7. Present Address:_____
8. Email ID: _____
9. Details of the Grievance:_____

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Signature of the Complainant with Date: