

Grievance Redressal Form

To
The Chairperson,
Grievance Redressal Cell (CGRC),
BFCACS, Vashi

Subject: Application for Redressal of Grievance/s

Respected Sir/Madam,

I/We am/are hereby forwarding my/our application for Redressal of Grievance/s. Kindly accept it and do the further processing. My/our personal details and particulars about my/our grievances are as follows:

01	Last Name of the Student	
02	First Name of the Student	
03	Middle Name of the Student	
04	Department	
05	Residential Address of the Student	
06	Permanent Address of the Student	
07	E-Mail ID of the Student	
08	Mobile No. of the Student	
09	WhatsApp No. of the Student	
10	Landline / Alternative Number	
11	Program	BA-CS/BBA/BCA/B.Com.
12	Class	FY / SY / TY
13	Semester	I/II/III/IV/V/VI
14	Year of Study	
15	Roll Number	

16	P R Number	
17	Name of the Teacher/s /Officer/s / Staff /Section/s / Department/s against whom the complaint is to be lodged	
18	Nature of the Grievance/s for which Redressal is sought	Write in Brief
19	List of supporting documents attached	Please Specify 1] _____ 2] _____ 3] _____

		4] _____
		5] _____

[Add Student Profile, if more no. of Students Applying for Redressal of Grievance]

Declaration from the Student/s

I/We hereby declare that the above information furnished by me/us is true to the best of my/our knowledge. In case if it is turned false I/we am/are personally responsible for the punishment.

Name & Signature of the Student

Date:

Place:

Please note:

- In case of grievance, Students should download this form, fill in all the details, and submit it to the College Office.
- The CGRC will review the complaint within 15 days of receiving it.
- If the Student's complaint is found to be false, the student is liable to face disciplinary action.
- The CGRC will function according to the guidelines given in "महाराष्ट्र शासन राजपत्र असाधारण भाग चार ब, असाधारण क्रमांक ६७".