



STUDENT GRIEVANCE FORM

Saraswati College of Education – Student Grievance Form

1. Student Details

- Name: _____
- Roll No./Enrollment No.: _____
- Course/Department: _____
- Contact Number: _____
- Email ID: _____

2. Type of Grievance (tick as applicable):

- Admission Fees/Scholarship Examination/Evaluation Academic Issues
 Harassment/Discrimination Facilities (Library/Labs/Transport) Other: _____

3. Description of Grievance:

4. Relief/Action Requested:

5. Declaration:

I hereby declare that the information provided above is true to the best of my knowledge. I understand that providing false information may lead to rejection of this grievance.

Signature of Student: _____

Date: _____