

**APPLICATION FOR EXAMINATION RELATED GRIEVANCE RECORDING**

|          |  |  |
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| <b>1</b> | <b>Name of the Candidate<br/>( in Block letters)</b> |  |
| <b>2</b> | <b>Register No.</b>                                  |  |
| <b>3</b> | <b>Name of the Programme</b>                         |  |
| <b>4</b> | <b>Contact Number : Student</b>                      |  |

|               |                                   |
|---------------|-----------------------------------|
| <b>Date:-</b> | <b>Nature of the Grievance :-</b> |
|---------------|-----------------------------------|

|                          |
|--------------------------|
| <b>Brief Explanation</b> |
|--------------------------|

**Place:**

**Date:**

**Signature of the candidate**

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**For Examination Cell use:**

|                     |  |
|---------------------|--|
| <b>Action Taken</b> |  |
|---------------------|--|

|                          |  |
|--------------------------|--|
| <b>Any other Remarks</b> |  |
|--------------------------|--|

**Signature of ACE / CE**