

MALINENI LAKSHMAIAH MBA COLLEGE
SINGARAYAKONDA PRAKASAM DT. 523101

Student Grievance cell format

Student Name :

Father name :

Course (select) : (MBA / MCA)

Year and SEM. :

Regd/HT.No. :

Contact No. :

Address with mail.ID:

Nature of grievance :

Grievance details :

Grievance submitted to : (chairman / principal

HOD / concerned / hostel warden)