

## **LUCKNOW PUBLIC COLLEGE OF PROFESSIONAL STUDIES,**

## **VINAMRA KHAND, GOMTI NAGAR, LUCKNOW- 226010**

## **Student Grievance Form**

1.	Student Name:					
2.	Course:					
3.	Class: Semester:					
4.	Session:	•••••				
5.	Mobile No.:					
6.	E-mail:	•••••				
7.	Area of Grievance:	Academic				
		Administrati	ve			
8.	Date of the problem or incid	dent:				
9.	Description of the <b>Problem/Incident:</b>					
		•••••				
		•••••				
10	. Has the problem been repo	rted:	Yes		No	
<b>11.</b> Action taken or Outcome of the Report:						
12. Cause of Dissatisfaction and Description of Appeal:						
	Student Signature:			Date:		