



“Sheel, Sharir, Adhyayan”
Aundh Shikshan Mandal, Aundh
RAJA SHRIPATRAO BHAGAWANTRAO MAHAVIDYALAYA, AUNDH
(SATARA)

Department of Examination

(Request for Redressal for Grievance in Examinations)

Date:

Name of Student:

Class:

1. Name of the Examination:

2. Subject:

3. Paper, (With nomenclature):

4. Date of examination:

5. Name of the teacher (who taught the paper):

6. Grievance (give details, use additional sheet, if necessary)-----

Forwarded for necessary action (with remarks, if any)

7. Teachers' comment:

Signature of the Examiner

8. Comments of Head of the Department:

Signature of the HoD

9. Comments by CEO:

Signature of the CEO