



M.K.E.S. COLLEGE OF LAW

STUDENT GRIEVANCE

Name of the Student:

Gender:

Email ID:

Phone Number:

Programme:

Year:

Division/Section:

Grievance:

Full Name / Signature:

Date:

**Student can email this form to mkeslaw.complaints@gmail.com or submit the Hard Copy to Grievance Committee In charge*

**Please attach the relevant documents, if any, along with this form.*



M.K.E.S. COLLEGE OF LAW

STAFF GRIEVANCE

Name of the Employee:

Gender:

Email ID:

Phone Number:

Designation:

Department:

Grievance:

Name/ Signature:

Date:

**Staff member can email this form to mkeslaw.complaints@gmail.com or submit the Hard Copy to Grievance Committee In charge*

**Please attach the relevant documents, if any, along with this form.*