



# All India Institute of Technology and Management

Chennai, Tamil Nadu, India

## GRIEVANCE FORM

Date:.....

Name of the Course : .....Year of Admission.....

Name : .....Enrolment No .....

Address:.....

.....

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Grievances in brief :

Signature of the Student:

(To be filled in by the Office)

Action taken :

Director.

The filled - in grievance form may be sent to

The Director - Acedemic

**All India Institute of Technology and Management**