

**COMPLAINT REGISTRATION FORM**

Name of the Candidate : \_\_\_\_\_

Registration Number : \_\_\_\_\_

Room Number : \_\_\_\_\_

Email-ID : \_\_\_\_\_

Date of Complaint : \_\_\_\_\_

Location of Complaint : \_\_\_\_\_

Domain of Complaint : Electrical, Civil, Water Supply, Mess, etc.

Complaint Details : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Complainee : \_\_\_\_\_

---

For Hostel office use only

Complaint Handled by : \_\_\_\_\_

Status of Complaint : \_\_\_\_\_

Confirmation of  
Complaint Resolving : \_\_\_\_\_

(Hostel Matron)