Complaint Form

1. Name of the Complainant:	
(Student/ Employee)	
2. Class / Department:	
3. Name(s) of Accused:	
4. Name of Witnesses (if any):	
5. Place, date and time of the incident:	
6. Describe the incident:	
I hereby declare that the allegation lodge information furnished here are true to the b	
Date:	
Place	Signature of the Complainant
Submit the complaint form to	
Smt. Tanuja S	
Librarian	•
Convener of Anti sexual Harassment Comm	ittee
Sri Umapragathi First Grade College	