

--Karnataka State--

CREATING INNOVATORS

5.1.4 Annual report of the committee monitoring the activities and number of grievances (2019-20)

Srinivas University

City Campus Pandeshwar

Mangalore-575001

COLLEGE OF PHYSIOTHERAPY

Date: 19.06.2020

Students' Grievance Redressal Cell Notice

Date: 19/06/2020

Time: 10.00 am

Venue: Pandeshwar campus

Members present:

1. Dr S Rajasekar, Dean, chairperson

2. Dr Ajay Kumar, member May

3. Dr Annayya Kulal, member

4. Ms Sahana, student president

Agenda of Meeting:

1. Address of the meeting by the Chairperson

2. Roles and Responsibilities of each committee member

3. Address Grievance about unavailability of projector remote in 3rd year classroom

Action plan:

Committee ensures that grievance will be sorted out within 2 days

Chairperson

Grievance Redressal Committee







Srinivas Nagar, Mukka-574 146, Surathkal, Mangaluru, Phone: 0824-247456

GRIEVANCE REDRESSAL FORM

	SI.No. 19 03 CMC (Same as entry in the register)
Please fill the form carefully and ret Name Adilk	
USN/Employee No. 25U19LS	004
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Query/Grievance/Problem	Hygin in the toilt
	For Office Use Only
Date and Time 19 03 7 2019 Problem Callegory:	Action Taken by the Department Por blue sugarned.
NOTE: If the redressal does not take place Expected Date of Redressal:	ce as expected, the student/user may please report to UGRC
Signature of Dealing Staff Name of Institute/Department:	
ACKNOWLEDGEME	SI. No 19 07 (No C) (Same as entry in the register)
Expected Date: 3 (3) 70 (7) (To be given by person receiving HOD) Name of Institute/Department:	Signature of Person Receiving: (with Date and Time) Name of the Person: SRINIVAS UNIVERSITY MANGALORE MANGALORE

Annexure - 3

University Level (UGRC)

Year: 2019

SI. No.	Enrollment/ Name Employee No.	Name	Programme / Semester / Section/ Department	Date of Receipt of Grievance (at dept level)	Expected Date of Redressal	Actual Date of Redressal*	Signature of GRO
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Annexure - 2
Department Level (DGRC)

Year: 2019-20

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Srinivas Nagar, Mukka- 574 146, Surathkal, Mangaluru, Phone :0824-247456

Annexure-1

Institute of Computer Science and Information Science

GRIEVANCE REDRESSAL FORM

(Sameasentryintheregister) Please fill the form carefully and retain the acknowledgment USN/Employee No. 3SUIA MCROR. lanan Name Institute CCIA Section Program Semester * Query/Grievance/Problem_ Clansoom ForOfficeUseOnly 21/10/19 Date and Time **ActionTakenbytheDepartment** ProblemCategory: NOTE: If the redressal does not take place as expected, the student/user may please report to UGRC Expected Date of Redressal: 30 10/2019 Signature of Dealing Staff Name of Institute/Department: ACKNOWLEDGEMENT: GRIEVANCE REDRESSAL FORM Sl.No_(Same as entry in the register) Expected Date: 30/10/2019 Signature of Person Receiving: (To be given by person receiving HOD) (with Date and Time) Name of Institute/Department: Name of the Person: SRINIVAS UNIVERSITY

MANGALORE



Srinivas Nagar, Mukka-574 146, Surathkal, Mangaluru, Phone :0824-247456

Annexure-

Institute of Computer Science and Information Science

GRIEVANCE REDRESSAL FORM

(Sameasentryintheregister) Please fill the form carefully and retain the acknowledgment USN/Employee No. 350 19 5A 042 Name Institute Program Semester_ Water Filter In Not Worl Query/Grievance/Problem 04/12/2019 For Office Use Only Date and Time **ActionTakenbytheDepartment** vail room & boilet cleaned NOTE: If the redressal does not take place as expected, the student/user may please report to UGRC Expected Date of Redressal: 18/12/2019 Signature of Dealing Staff Name of Institute/Department: ACKNOWLEDGEMENT: GRIEVANCE REDRESSAL FORM Sl.No_(Same as entry in the register) Expected Date: 18 12 2019 (To be given by person receiving HOD) Signature of Person Receiving: (with Date and Time) Name of Institute/Department: Name of the Person:

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