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EXAM RELATED GRIEVANCE FORMAT

Name of Complainant	
Contact Number	
Email	
Studying in	

NATURE OF GRIEVANCE	
Subject:	
Theory / Practical	Internal Exam / MUHS Exam

Undertaking
I hereby declare that the information furnished above by me is true and accurate. Further, I understand that disciplinary action can be taken against me if the above allegations are found incorrect or malicious.

Signature of Complainant	
Date	