

|| Tewa Sada Dyanmay Pradip ||  
SHANKARRAO MOHITE MAHAVIDYALAYA, AKLUJ  
Tal. Malshiras Dist. Solapur 413 101 (MS)

**Application Form**

Grievances Regarding Internal Examination /Assessment

- 1) Name of the Student : -----
- 2) Class & Division : -----
- 3) Roll No. : -----
- 4) Academic Year : -----
- 5) Semester : -----
- 6) Subject : -----
- 7) Name of the paper : -----
- 8) Paper No. : -----
- 9) Mobile No. : -----
- 10) Email Address : -----

11) Nature of Grievance with details :

-----  
-----  
-----  
-----

**Signature of Student**

12) Remark of concerned Teacher

-----  
-----  
-----  
-----

**Signature of Teacher**

13) Forwarded for suitable action to -----

Date :

**Principal**