



Appeal Form  
**Office of the Ombudsperson**

**I.** Please share the following details:

Name	
School	
Programme	
Batch	
Regd. No / Roll No.	
Email Address	
Contact Number	

**II.** Briefly share relevant information pertaining to the nature of grievance(s) for which redressal is being sought:

**III.** Mention details regarding the internal mechanisms availed within the University to address/resolve your grievance(s) and the results:

Date:

Signature: