GRIEVANCE REDRESSAL MECHANISM:

A Grievance Redressal committee has been formed in our college to settle genuine grievances of students, staff and parents up to a satisfaction level so as to create a healthy relationship among the students, parent's employees and employer. The grievance will include any matter relating to student and staff. The committee is requested to contribute effectively to dispose the grievances at the earliest.

OBJECTIVES:

- 1. To deals with all the genuine grievances of students and staff of the college.
- 2. All complainant should file their grievances either by writing in paper to the committee or by online on the website of the college.
- 3. The committee will meet at least once in a month to resolve the grievances.
- 4. To take conclusive decision and submit its recommendations to the deciding authority for removal of alleged grievances.
- 5. The student/staff shall bring up his/her grievance in a prescribe format immediately to the grievance cell without fail.

FUNCTIONS:

- 1. To enquire into complaints received from the aggrieved students or staff of the college including complaints on ragging.
- 2. To recommend to the principal of the college, the penalty to be imposed.

PROCEDURE:

1) A compliant box is provided at the ground floor for students.

2) All grievances referred to the Grievance Redressal committee shall be headed by senior Faculty member, Head of the Department, Senior Lady staff member and a Senior member from Bc., Sc., ST., categories entered in a Register by designated member.

- 3) All complaints should be resolved within a time frame by looking into its seriousness and by two way approach.
- 4) Any staff/student may report directly to the Principal for resolving their Grievance if he/she is dissatisfied by the GRC.

COMMITTEE:

S.No.	Actual Designation	Designation in the committee	Name of the Faculty
1	Principal	President	Dr M S Saritha
2	Assistant Professor	Convener	Mr K Mahesh
3	Assistant Professor	Member	Mr G Babu
4	Assistant Professor	Member	Mrs V Radha

GRIEVANCE FORMAT

Name of the complainant
Designation (if any)
Place of Work-(Department)
Nature of Grievance

Undertaking

I here 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 the Complainant

Date-

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