



# INSTITUTE OF AERONAUTICAL ENGINEERING

(Autonomous)

Dundigal, Hyderabad - 500 043

## Student Complaint Form

### Stage I – In-charge Grievances Redressal

#### Form C1

- Please ensure that you have read the [Grievance Redressal Policy](#) before you complete this form.
- Advice on completion of the form can be obtained from the I/C Grievances and Redressal and we recommend that you contact them by E-mail: [dean-grc@iare.ac.in](mailto:dean-grc@iare.ac.in) or contact at **9490244578**
- Any person about whom the complaint is made will be supplied with the copy of the complaint.
- Anonymous complaints will not be accepted under this procedure.

If possible, please complete this form by typing in. If completing by hand, please make sure your handwriting is easy to read.

Once completed, please submit this form with all relevant evidence to [dean-grc@iare.ac.in](mailto:dean-grc@iare.ac.in)

#### Details:

Title (select one)	Mr / Ms
Name of the Student	
Roll Number	
Department	

#### Contact information:

Institute Domain Email	
Alternative Email	
Phone Number	
Contact Address	

#### Student Council:

If you have sought advice from the IARE Students Council, please complete this part of the form.

Name of your student Council advisor	
Do you consent to us sharing the outcome of your complaint with your Student Council advisor?	Yes / No

#### Representative:

If you are being represented by another person, who should be contacted directly regarding this complaint, please provide their details below. They will also need to sign this form on the last page.

Title (select one)	Mr / Ms
Name of representative	
Relationship to student	
Email	
Phone Number	
Contact Address	

**Complaint:**

Please set out the main points of your complaint, including dates of incidents and persons involved. If you are completing this form by hand and require more space, continue writing on a separate sheet of paper and attach it to this form.

**Supporting evidence:**

Please attached any relevant documents, for example, email correspondence, to this form. Please list below the evidence you are attaching to support your complaint.

**Actions you have taken:**

Please outline what steps you have taken to resolve your complaint informally, including details of Head of the Department / staff members you have involved. Please provide reason(s) why you are not happy with the outcome of their actions and the response received.

### **Requested outcome:**

Please indicate what outcome you are expecting in order to resolve your complaint.

### **Declaration**

By signing this document, you agree that:

- I have read and understood the [Grievance Redressal Policy](#)
- I declare that the information given in this form is true and accurate to the best of my knowledge.
- I am willing to answer further question relating to this matter if required.
- In order for this complaint to be investigated without prejudice, I give my consent for:
  - The Institute to use the information provided on and with this form to investigate my complains and the details provided to support services within the institute if necessary to conduct a thorough investigation.
  - Any member of staff mentioned in my complaint to be made aware and given the opportunity to comment.
  - Any person about whom the complaint is made to be supplied with a copy of my complaint and supporting evidence.

Student signature:

Representative's signature (if applicable):

Date:

Date: