

**Chhotu Ram Arya College, Sonipat-131001**  
**Complaint form**

**1. Complaint Regarding:**

- Caste-discrimination
- Class discrimination
- Gender Discrimination (Sexual Harassment)
- Ragging
- Any Other Issue

**2. Name of the Student:** \_\_\_\_\_

**3. Father's Name:** \_\_\_\_\_

**4. Class** \_\_\_\_\_ **Roll No.** \_\_\_\_\_

**5. Address:** \_\_\_\_\_

\_\_\_\_\_ **E-mail** \_\_\_\_\_ **Contact No.** \_\_\_\_\_

**6. Please outline the complaint/issue, including relevant dates, times, location and background information, witnesses to the incident, photographs etc. (attach additional page if required):**

**Signature of the Complainant**

**Name & Signature of the witness  
with complete address**

**For Office use only:**

**Complaint No.** \_\_\_\_\_ **Received By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Forwarded to:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Summary of Action Taken**

**Signature of the Redressal Officer**