

DAYANAND COLLEGE OF COMMERCE, LATUR
FORMAT FOR LODGING COMPLAINT OF CASTE BASED DISCRIMINATION BY
SC / ST / OBC STUDENTS / TEACHERS / NON-TEACHING STAFF

Name of the Complainant :		
Category:		SC /ST /OBC
	Course being pursued :	
For Students	Roll Number :	
For Teachers / Non Teaching Staff	Designation :	
Department :		
Contact Details (Postal address and email ID) :		
Nature of the Complaint (in brief) :		
Place and Date of incident :		
Any witness of incident/Evidence :		
Signature :		