



Metric: 5.1.5

‘Complaint Form’

Academic Session: 2016-2021



DON BOSCO COLLEGE

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DON BOSCO COLLEGE, ITANAGAR

Women Cell and Sexual Harassment and Prevention Cell

COMPLAINT FORM

Details of Victim

Name :

Department/Semester :

Victim :

Contact Number :

Mail ID :

Details of Accuser

Name (Accuser) :

Class (of accuser) :

Compliant :

.....
.....
.....
.....
.....

Time :

Date :

Signature :



PRINCIPAL
DON BOSCO COLLEGE
JOLLANG-ITANAGAR
ARUNACHAL PRADESH