



ISLAMIC UNIVERSITY OF SCIENCE & TECHNOLOGY
AWANTIPORA, KASHMIR

Form for Appeal to Ombudsperson

Name : _____

Designation : _____

Department : _____

Phone Number : _____

Email ID : _____

Place of residence:
(City and State) _____

Brief statement of nature of grievance:

Brief statement of internal redressal mechanisms pursued and results:

Date: _____

Signature _____

