

  
**PERIYAR UNIVERSITY**  
**PERIYAR PALKALAI NAGAR, SALEM – 636 011**

**STUDENTS' GRIEVANCES REDRESSAL CELL**  
**(For University Department Students)**

**FORM A**  
***FORM OF APPLICATION***

No:

To  
**The Registrar**  
**Periyar University**  
**Periyar Palkalai Nagar, Salem -636 011**

Sir

1. Full name :
2. Department name :
3. Telephone/Mobile No. if any :
4. Particulars of class, division, year :  
in which studying
5. Grievances in which redressal is :  
sought
  
6. Whether you previously approached :  
Any authority/person/Section for  
redressal of said grievances.  
If so, what was the result?

I am willing to furnish such further information as may be required for the purpose of enabling the committee to consider the application.

The above statements are true to the best of my personal knowledge and belief.

Date: \_\_\_\_\_

Place: \_\_\_\_\_

( \_\_\_\_\_ )  
Signature of the applicant

Note:

1. The application (Form A) is submitted to the student's grievances redressal cell of the University in person or through email [pusgrc@gmail.com](mailto:pusgrc@gmail.com)
2. For each grievance separate application form may be used.
3. The copies of certificates, letters, orders, etc. which are relevant for considering the request of the applicant should be enclosed with the application.

---

**For office use only**

Submission date of Form A to grievance cell :

Despatch date of Form B to the concerned section: \_\_\_\_\_

Committee session: \_\_\_\_\_

Committee date: \_\_\_\_\_

Date in which action taken report received: \_\_\_\_\_

Signature of the members with date

---