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Student's Grievance Form

NAME (IN CAPITAL LETTERS ONLY)	RAHUL KUMARSTAN
COLLEGE ROLL NO. (Please attach a copy of College Identity Card)	44
COURSE	B.Ed.
YEAR OF ADMISSION	14.05.19
EMAIL IÐ	
CONTACT NUMBER	7367023936
PRESENT ADDRESS	Singhia, Samastipuz 840209
POSTAL ADDRESS	Pro
PARENT'S/GUARDIAN'S NAME	Rambriksha Singh
PARENT'S/GUARDIAN'SCONTACT	7367023936
Need of C urgently,m	Ceiling Fan in classroom Room NO. 03.
SCLAIMER: I hereby undertake that the information prov ill be completely liable for any disciplinary action, if any fa Rahul Ruever Such 04.09.20 SNATURE OF THE STUDENT DTE :	ided hereby is up to the best of my knowledge and belief. alse information furnished. PRINCIPAL St. Paul Teachers' Trainin Birsinghpur
 Complaints/Grievances are required to be submit downloading from the college website only (with respects; incomplete forms will not be entertained Complaints are required to be submitted in person 	



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Student's Grievance Form NAME SHRUTI KUMARI (IN CAPITAL LETTERS ONLY) COLLEGE ROLL NO. (Please attach a copy of College Identity 16 Card) COURSE B.Ed. YEAR OF ADMISSION 24.11.2020 EMAIL ID CONTACT NUMBER 6201600478 PRESENT ADDRESS Waini. OP, Pusa samashim POSTAL ADDRESS 20 PARENT'S/GUARDIAN'S NAME Derchandra Rau PARENT'S/GUARDIAN'SCONTACT 6201600470 NO. of Crickel-ball. Requirement-**GRIEVANCE:** DISCLAIMER: I hereby undertake that the information provided hereby is up to the best of my knowledge and belief. I will be completely liable for any disciplinary action, if any false information furnished. Shrite Kumari og, 03 21

SIGNATURE OF THE STUDENT

NOTE :

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PRINCIPAL

St. Paul Teachers' Training Colleg: Bireinghpur

Complaints/Grievances are required to be submitted in the above prescribed format (handwritten) after the downloading from the college website only (with relevant documents/proof). Form should be complete in all respects; incomplete forms will not be entertained (Maximum Words Limit 250). 2. Complaints are required to be submitted in person by the complainant in a sealed envelope only Friday of every-month in the P.A. Principal's office. PRINCIPAL Ci4, Scomplainant will be contacted on given contact number only for the redressal of the grigrapser Teachers' Training Coffees. Complainant should retain a copy of the grievance with himself/herself. 5. Birsinghpur

Decision of the committee will be final and binding.

Jhahuri, Samastiour

ST. PAUL TEACHERS' TRAINING COLLEGE BIRSINGHPUR (Under Aegis of Parmeshwar Neeta Education Trust)

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Studen	t's Grievance	e Form

(IN CAPITAL LETTERS ONLY)	PRATOSH KUMAR
COLLEGE ROLL NO. (Please attach a copy of College Identity Card)	09 1
COURSE	B.Ed.
YEAR OF ADMISSION	23.11.2020
EMAIL ID	
CONTACT NUMBER	8084866368
PRESENT ADDRESS	Kon BASIAJon Misuell'
POSTAL ADDRESS	Bu
PARENT'S/GUARDIAN'S NAME	Sudhir singh
PARENT'S/GUARDIAN'SCONTACT NO.	8084866368
GRIEVANCE: Need of. and Societ	8084866368 Course_6 Gender School ty Books.
will be completely liable for any disciplinary action, if any f	rided hereby is up to the best of my knowledge and belief. alse information furnished.
ISCLAIMER: I hereby undertake that the information prov will be completely liable for any disciplinary action, if any f Pratosh Kumar ISTIT2021 IGNATURE OF THE STUDENT	rided hereby is up to the best of my knowledge and belief. False information furnished.

Decision of the committee will be final and binding. 6.

Birsinghpur Jhaburi, Samastiyur

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Student's Grievance Form

NAME (IN CAPITAL LETTERS ONLY)	ANIL KUMAR
COLLEGE ROLL NO. (Please attach a copy of College Identity Card)	10
COURSE	B.Ed
YEAR OF ADMISSION	13.08.2018
EMAIL ID	
CONTACT NUMBER	9534708382
PRESENT ADDRESS	AT+ DO-L-S. Kanth, Korbaddhe Word NO-D8 PS+13is-Samustipus
POSTAL ADDRESS	D-O
PARENT'S/GUARDIAN'S NAME	Ram chandra Manto
PARENT'S/GUARDIAN'SCONTACT NO.	9534708382
GRIEVANCE: Classroom J	7 LED Bull and
3-119249 NT E	F LED Bulls and
SCLAIMER: I hereby undertake that the information pro vill be completely liable for any disciplinary action, if any Amy Kueu 912119	vided hereby is up to the best of my knowledge and belief. false information furnished.
GNATURE OF THE STUDENT	SL Paul Tonth

Complaints/Grievances are required to be submitted in the above prescribed format (handwritten) after downloading from the college website only (with relevant documents/proof). Form should be complete in after complete forms will not be entertained (Maximum Words Limit 250).
 Complaints are required to be submitted in person by the complainant in a sealed envelope only.
 Complaints are required to be submitted in person by the complainant in a sealed envelope only.
 Complaints are required to be submitted in person by the complainant in a sealed envelope only.
 Complaints are required to be submitted in person by the complainant in a sealed envelope only.
 Complainant will be contacted on given contact number only for the redressal of the grievance PRINCIPAL
 Secomplainant should retain a copy of the grievance with himself/herself.
 Decision of the committee will be final and binding.

Birsinghpur Jhahuri, Samastiou



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Student's Grievance Form

NAME (IN CAPITAL LETTERS ONLY)	KUMARE WARSHA
COLLEGE ROLL NO. Please attach a copy of College Identity Card)	22
COURSE	B-Ed.
YEAR OF ADMISSION	11.05.19
EMAIL ID	
CONTACT NUMBER	9097745574
PRESENT ADDRESS	Chamannur, stjechar 843329
POSTAL ADDRESS	Do
PARENT'S/GUARDIAN'S NAME	Vijary Ranjan singh
PARENT'S/GUARDIAN'SCONTACT NO.	9097743574
CRIEVANCE: Drinking wa anyi - ania 24 fayi - Jin	ter all united Et -an unitary- 31-

 Complaints/Grievances are required to be submitted in the above prescribed format (narrowinter) anterdownloading from the college website only (with relevant documents/proof). Form should be complete in all in the prescription of the complete forms will not be entertained (Maximum Words Limit 250).
 Complaints are required to be submitted in person by the complainant in a sealed envelope only.
 Complaints are required to be submitted in person by the complainant in a sealed envelope only.
 Complaints are required to be submitted in person by the complainant in a sealed envelope only.
 Complainant will be contacted on given contact number only for the redressal of the grievance.
 SpTTCB, 5: Complainant should retain a copy of the grievance with himself/herself.
 Decision of the committee will be final and binding.



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Student's Grievance Form

NAME (IN CAPITAL LETTERS ONLY)	PINKI KUMARI
COLLEGE ROLL NO. (Please attach a copy of College Identity Card)	21
COURSE	B.Ed.
YEAR OF ADMISSION	13.08.2018
EMAIL ID	
CONTACT NUMBER	91355577276
PRESENT ADDRESS	Patsa, Hasanbon Samushi
POSTAL ADDRESS	20
PARENT'S/GUARDIAN'S NAME	Ranchandorg paclary
PARENT'S/GUARDIAN'SCONTACT NO.	913555-7276
GRIEVANCE: Library - 3424 yerda	7 Course-9 of 3/1- n 3/19249/1-E)
ISCLAIMER: I hereby undertake that the information prov will be completely liable for any disciplinary action, if any t	vided hereby is up to the best of my knowledge and belief. false information furnished.
IGNATURE OF THE STUDENT	PRINCIPAL
OTE : 1. Complaints/Grievances are required to be subn	St. Paul Teachers' Trainin nitted in the above prescribed format (handwritten) after,

downloading from the college website only (with relevant documents/proof). Form should be complete in all pespects; incomplete forms will not be entertained (Maximum Words Limit 250). Complaints are required to be submitted in person by the complainant in a sealed envelope only.

CO-Or a Friday of every month in the P.A. Principal's office. Complainant will be contacted on given contact number only for the redressal of the grievance SPTTCB, Sansat complainant should retain a copy of the grievance with himself/herself. Decision of the committee will be final and binding.

PRINCIPAL St Paul Teachers' Training College Birsinghpur Jhahuri, Samastipur



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ST. PAUL TEACHERS' TRAINING COLLEGE BIRSINGHPUR

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Student's Grievance Form

NAME	
(IN CAPITAL LETTERS ONLY)	SONALI KUMARI
COLLEGE ROLL NO. (Please attach a copy of College Identity Card)	15
COURSE	B-Ed.
YEAR OF ADMISSION	25-09-2-1
EMAIL ID	Sistermishing 94 @ Lom
CONTACT NUMBER	9693123147
PRESENT ADDRESS	Khanjoner, I amoush' for
POSTAL ADDRESS	Do
PARENT'S/GUARDIAN'S NAME	Santosh km. mishra
PARENT'S/GUARDIAN'SCONTACT NO. GRIEVANCE:	9693123147
NO.	9693123147 akage in Gibs Répair.
NO.	CONTRACT DI LA CONTRACTÓ DE LA CONTRACTÍCICACTÓ DE LA CONTRACTÍCICACTÍCICACTÓ DE LA CONTRACTÍCICACTÍCICACTÍCICACTÍCICACTÍCICACTÍCICACTÍCICACTÍCACTÍ
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NO. GRIEVANCE: Bathroom. Tap le Bathroom. Please ISCLAIMER: I hereby undertake that the information will be completely liable for any disciplinary action, if a	akage in Gils Repair .
NO. GRIEVANCE: Bathroom. Bathroom. Please ISCLAIMER: I hereby undertake that the information will be completely liable for any disciplinary action, if a FIGHEN Sy. I. 21 IGNATURE OF THE STUDENT	akage in Gils Repair .

Friday of every month in the P.A. Principal's office. Complainant will be contacted on given contact number only for the redressal of the grievance RINCIPAL Complainant should retain a copy of the grievance with himself/herself. Decision of the committee will be final and binding.

Birsinghour Jhahuri, Samastiour



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Student's Grievance Form

NAME (IN CAPITAL LETTERS ONLY)	DURHESH KUMAR
COLLEGE ROLL NO. (Please attach a copy of College Identity Card)	12
COURSE	B.Ed.
YEAR OF ADMISSION	25-09-21
EMAIL ID	drugeshur 1999 @gmail.
CONTACT NUMBER	8709421558
PRESENT ADDRESS	Phyland Kalyan) som
POSTAL ADDRESS	Do
PARENT'S/GUARDIAN'S NAME	Manaj Kn. Singh
PARENT'S/GUARDIAN'SCONTACT NO.	8709421558
	A oper Desk damage
ISCI AIMER: I bereby undertake that the information pro	wided hereby is up to the best of my knowledge and belief.
will be completely liable for any disciplinary action, if any Dugesh Kumar. 10.11.21	false information furnished.
IGNATURE OF THE STUDENT	St. Paul Teachara' Training Col





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Student's Grievance Form

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Ravi Kumarzzz

PRINCIPAL

St. Paul Teachers' Training Collegy

NOTE :

SIGNATURE OF THE STUDENT

4. Complaints/Grievances are required to be submitted in the above prescribed format (bandwritten) after respects; incomplete forms will not be entertained (Maximum Words Limit 250).
 2. Complaints are required to be submitted in person by the complainant in a sealed envelope only
 3. Friday of every month in the P.A. Principal's office.
 4. Complainant will be contacted on given contact number only for the redressal of the grievance RINCIPAL
 5. Complainant should retain a copy of the grievance with himself/herself.
 6. Decision of the committee will be final and binding.

Birsinghpur Jhanun, Samastipur

ST. PAUL TEACHERS' TRAINING COLLEGE BIRSINGHPUR (Under Aegis of Parmeshwar Neeta Education Trust)

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Student's Grievance Form

NAME (IN CAPITAL LETTERS ONLY)	AMAN KUMAR
COLLEGE ROLL NO. (Please attach a copy of College Identity Card)	09
COURSE	B.Ed.
YEAR OF ADMISSION	27.9.17
EMAIL ID	Aman 26843@qmail. Lou
CONTACT NUMBER	
PRESENT ADDRESS	Satural Ism Jamash'm
POSTAL ADDRESS	80
PARENT'S/GUARDIAN'S NAME	Shatty Dhan Dal
PARENT'S/GUARDIAN'SCONTACT NO.	
GRIEVANCE: Projector R Bi- HI9249MI-E BR	00m A 4721- 000/10 7 000/11 00- 0041-
SCLAIMER: I hereby undertake that the information provid ill be completely liable for any disciplinary action, if any fa Amar Kuman 11-8-2017	Ise information furnished.
GNATURE OF THE STUDENT	St. Paul Teachers' Train Bized a pirpu
 Complaints/Grievances are required to be submit downloading from the college website only (with respects; incomplete forms will not be entertained (Complaints are required to be submitted in person to a submitted in per	tted in the above prescribed format (handwritten) after elevant documents/proof). Form should be complete in all Maximum Words Limit 250). by the complainant in a sealed envelope only.

SPTTCI5 Sacomplainant will be contacted on given contact number only for the redressal of the grievance. PRINCIPAL SL Paul Teachers' Training College 6. Decision of the committee will be final and binding.

Birsinghpur mahuri, Samastipur



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ST. PAUL TEACHERS' TRAINING COLLEGE BIRSINGHPUR

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Student's Grievance Form

NAME (IN CAPITAL LETTERS ONLY)	KAUSHAL KUMAR YADAN
COLLEGE ROLL NO. (Please attach a copy of College Identity Card)	09
COURSE	BEd.
YEAR OF ADMISSION	2022
EMAIL ID	Keushel 91557@ gmail. 6
CONTACT NUMBER	7563957565
PRESENT ADDRESS	Paron'ya, mangalbHud Hasanpur Samashipon
POSTAL ADDRESS	00
PARENT'S/GUARDIAN'S NAME	RAMSEVAK VADAY
	11.1. 20 11. 11. 2017
PARENT'S/GUARDIAN'SCONTACT NO. GRIEVANCE:	9708092775
NO. GRIEVANCE: Computer MJI/11 JKAYJ- E	9708092775 Room (ICT) AC IC I'- 1 OPEN DIAT MOINTE) provided hereby is up to the best of my knowledge and belief.
NO. GRIEVANCE: Computer MUMIT UTKART E	9708092775 Room (ICT) AC IC I'- 1 OPEN DIAT MOINTE) provided hereby is up to the best of my knowledge and belief.
NO. GRIEVANCE: Computer MJI/11 JANJ- E ISCLAIMER: I hereby undertake that the information will be completely liable for any disciplinary action, if a	9708092775 Room (ICT) AC IC I'- 1 OPEN DIAT MOINTE) provided hereby is up to the best of my knowledge and belief.

Complaints are required to be submitted in person by the complainant in a sealed envelope only. Friday of every month in the P.A. Principal's office.

TCB: Sa Complainant will be contacted on given contact number only of therself. St Paul 6. Decision of (bridge)

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Birsinghpur Jiahuri, Samastipur