

**ANNEXURE-V**  
**NATIONAL INSTITUTE OF TECHNOLOGY, ARUNACHAL PRADESH.**  
**HOSTEL COMPLAINT FORM**

HOSTEL NAME AND ROOM NUMBER :

DATE OF COMPLAINT : REGISTERED IN (FILE NAME) :	STUDENT NAME : MOBILE NUMBER :
TIME OF AVAILABILITY : 1. (MIN. FOUR CHOICE) 2. (WITH THREE DAYS GAP) 3. 4.  ANY OTHER TIME _____(5) (IF NOT AVAILABLE HANDOVER THE KEY TO SECURITY WITH ROOM NUMBER PASTED ON THE KEY) NATURE OF COMPLAIN :  PLEASE USE BACK SIDE ALSO	ATTENDED OR NOT :  REASON FOR NOT ATTENDING :   SIGN OF ELECTRICIAN OR PLUMBER WITH DATE :  (I HAVE SEEN THE BACK OF THE FORM ALSO)
STUDENT NAME AND SIGN:	HOSTEL REPRESENTATIVE NAME AND SIGN:
HOSTEL WARDEN SIGN:	DEAN(SA) SIGN:

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REMARK

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