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L. S. RAHEJA COLLEGE OF ARTS & COMMERCE
Estd : 1980
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SEXUAL HARASSMENT COMPLAINT FORM

Name of the Student: _____ ***Gender:*** _____

Email ID: _____ ***Phone No:*** _____

Programme: _____ ***Year:*** _____ ***Div/Section:*** _____

Complaint:

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_____

Full Name of the Complainant and Signature: _____

Date: _____

Place: _____

**Student can email this form to icc@lsraheja.org or submit the hard copy to any member of the Internal Committee*

**On receiving the email, the Internal Committee will contact you.*