KM COLLEGE OF TEACHER EDUCATION

Valillapuzha, Areekode, Malappuram – 673639
(Affiliated to University of Calicut & Recognised by NCTE)

INTERNAL COMPLAINTS COMMITTEE (ICC)

CONFIDENTIAL COMPLAINT FORM

1. COMPLAINANT DETAILS

Name:	
Course / Class:	
Roll No.:	
Contact No.:	
Email (if any):	

2. DETAILS OF THE COMPLAINT

Date of Incident:		**Time:**	
Place:			
Name/Details of Person(s) Against Whom Complaint is Made:			

Nature of Complaint:

■ Harassment	■ Sexual Harassment	■ Verbal/Behavioural Misconduct
■ Online/Digital Harassment	■ Other:	_____

3. DESCRIPTION OF THE INCIDENT

Please describe the incident clearly, including relevant dates, places and details:

4. WITNESSES / SUPPORTING EVIDENCE (IF ANY)

5. RELIEF / ACTION REQUESTED

I declare that the information provided above is true to the best of my knowledge. I understand that the complaint will be handled according to applicable institutional rules and procedures, with due confidentiality.

Date: _____ Signature of Complainant: _____

Place: _____

FOR ICC OFFICE USE ONLY

Complaint No.:		**Date Received:**	
Received By:			
Action Taken / Remarks:			
Signature of ICC Chairperson:		**Date:**	