

UNIVERSITY COLLEGE OF ENGINEERING THIRUKKUVALAI

(A constituent College of Anna University::Chennai Approved by AICTE, New Delhi) NAGAPATTINAM (DT) 610204

Internal Complaint Form

Date of Submission:

1. Complainant Information

- Name:
- Student ID/Employee ID :
- Contact Information (Phone/Email):
- Department/year:

2. Incident Details

- Date of Incident(s):
- Location of Incident(s):
- Name of the Respondent(s):

1. _____

2. —
Relationship to Complainant (e.g., classmate, professor, etc.):

3. Description of Incident

Please provide a detailed description of the incident(s) of sexual harassment, including what was said or done, any witnesses present, and any other relevant information. Attach additional pages if necessary.

4. Witnesses (If any)

- Name:
- Contact Information:
- Relationship to Incident:

5. Evidence (If any)

Please list any evidence related to the complaint (e.g., emails, text messages, screenshots, photographs, etc.) and attach copies if possible.

6. Declaration

I hereby declare that the information provided in this complaint is true and accurate to the best of my knowledge. I understand that the Institution may need to investigate the matter and take appropriate action.

Signature: Date:

Received by

1. Presiding Officer:

2.Faculty Member :

3.Student Counsellor: