



Feedback Form for Various Initiatives by AICTE

Details of Grievances Processed by The Institute

Date:	17/04/2018	Institute PID:	<input type="text"/>
Institute Name:		Institute Address:	
Institute City:		Institute State:	
Institute Contact NO.:		Principal Name:	
Grievances for the Month	<input type="text" value="January"/> ▼		
Total Number of Grievances Received?	<input type="text"/>		
Total Number of Grievances Disposed?	<input type="text"/>		
Total Number of Grievances Pending	<input type="text"/>		
<input type="button" value="Submit"/>		<input https:="" survey-form"="" type="button" value="Back to Other Survey (https://www.aicte-india.org/survey-form)"/>	