



University of South Asia

CRITICAL AFFAIRS FORM

(OFFICE USE ONLY) Forwarded To:

Date: / / 201_

Name	
Father's Name	
Program & Campus	
Roll #	
Semester & Module	
Contact # & Email	
Address	

Which factors do you believe are affecting your academic life being student?

(Please the Tick Relevant Option)

- Person (Communication\Performance\Behavior)
- Processes (Procedures)
- Policies (Rules & regulations)
- Equipment\Infrastructure(Faulty\Out of order\Not available)
- Extra Ordinary Leave (Longer than allowed)
- Any Specific Department
- Any Disciplinary Issue
- Any Other Complaint

DESCRIBE YOUR COMPLAINT

(ATTACH ADDITIONAL PAGES IF NECESSARY & DOCUMENTARY EVIDENCE IF NECESSARY)

WHAT STEPS HAVE YOU TAKEN TO RESOLVE YOUR COMPLAINT?

WHAT IS YOUR DESIRED OUTCOME?

Student Signature:

Date:

