## **APPENDIX-8**

## **Candidate's Application for Grievances Related to Test / ESE Examination**

To, The Principal, KJSIT, Sion, Mumbai-22.					
*Sub: Grievance rega	arding:				
*Attach separate doc Details of examination					
Year:	Semester:	Branch:	Exam: ESE/Test1/Test2/c	Exam: ESE/Test1/Test2/other	
Date of examination:	Block/Room	No. (for Open House	·):		
Name of the course (V	Vrite full form		Day/Time of Exar	nination:	
Name of Candidate: Branch: Signature:	Mob. No.:	Seat No.: Somaiya	Seat No.: Class: Div.: Somaiya Email ID:		
HOD's Comments: _					
HOD's Signature:					
Final decision of the	EEC:				
COE			EEC Chairperson/Pri	ncipal	