To Coordinator MBA Twinning Programme St. Joseph's Institutions Bengaluru

Dear Sir

SUBJECT: ATTENDANCE GRIEVANCE/CLAIM FORM				
This is t	to bring to your kind notice I g MBA owing attendance for the ensuing	Semeste	r. specializing in	Register Number
has follo	owing attendance for the ensuing	; semester (Mo	nthYear	`)
Sl No	Subjects	No. of Classes Taken	No. of Classes Attended	Percentage enhanced by the concerned authority
1.				
2.				
3.				
4.				
5.				
Mentio	on your grievance/Claim below	and also attach	the necessary do	cuments along with the
	1.			
	2			
Grieva	nce/Claim Accepted or Rejecte	d by the Coord	linator	