

## **Detailed Form for Anti-Ragging**

### **Student Details**

Name \_\_\_\_\_

Roll Number \_\_\_\_\_

Course \_\_\_\_\_

Year \_\_\_\_\_

Contact Number \_\_\_\_\_

Email Address \_\_\_\_\_

### **Parent/Guardian Details**

Name \_\_\_\_\_

Contact Number \_\_\_\_\_

Email Address \_\_\_\_\_

### **Details of Ragging Incident**

Date of incident \_\_\_\_\_

Time of incident \_\_\_\_\_

Location of incident \_\_\_\_\_

Description of incident \_\_\_\_\_

Names of perpetrators (if known) \_\_\_\_\_

## **Steps Taken by Student**

\* Did you report the incident to the Anti-Ragging Committee? If so, when?

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\* Did you seek medical attention? If so, when?

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\* Did you file a police complaint? If so, when?

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## **Additional Information**

Any other relevant information that you would like to share

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Signature of Student

Date

## **Instructions**

Please fill out this form with as much detail as possible. If you are not comfortable filling out the form yourself, you can ask a friend or family member to help you. You can also contact the Anti-Ragging Committee for assistance.

Once you have completed the form, please submit it to the Anti-Ragging Committee. The Committee will investigate the incident and take appropriate action.

Thank you for your cooperation.