PGS Form 10 (2019)

**UNIVERSITY OF ILORIN**

**POSTGRADUATE SCHOOL**

**COMPLAINT FORM ON I.T. RELATED ISSUES**

**(Please note that you are to check back for feedback at least 24hours after submission or check your email)**

* Name:…………………………………………………………………………………………...
* Faculty:…………………………………………………………………………………………
* Department:…………………………………………………………………………………….
* Matriculation Number:…………………………………………………....................................
* Email address:…………………………………………………………………..........................
* Signature:…………………………..Mobile No:………………………………………………
* Nature of Problem (Be brief and concise):

1.………………………………………………………………………………………………………..……………………………………………………………………………............................................. 2………………………………………………………………………………………………………...………………………………………………………………………………………………………….

3………………………………………………………………………………………………………....……………………………………………………………………………............................................

4…………………………………………………………………………................................................................................................................................................................................................................

**OFFICIAL USE ONLY**

* Action (s) taken/Recommendation:…………………………………………………………….

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* I.T. Officer’s Name:…………………………………………………………………………….
* Signature and Date:………………………..…………………………………….............