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# MAHARAJA AGRASEN INSTITUTE OF MANAGEMENT STUDIES

Maharaja Agrasen Chowk, Sector-22, Rohini, Delhi-110086



## SUGGESTION FORM FOR THE HOSTEL

Name of the Student: \_\_\_\_\_

Name of the Institute: \_\_\_\_\_

Programme: \_\_\_\_\_

Hostel: \_\_\_\_\_

Room No: \_\_\_\_\_ Contact No \_\_\_\_\_

Problem Identified: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Suggestion:

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\_\_\_\_\_

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\_\_\_\_\_

Signature of the Student \_\_\_\_\_ Date: \_\_\_\_\_

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