

Date: 06-05-22

**Notice**

If the students of Innovative College of Pharmacy have any kind of grievance regarding their marksheet, degree or diploma, they need to write an application addressing to the principal of college and mention all the detailrelated to the issue and mail it on [aman@innovativepharmacy.in](mailto:aman@innovativepharmacy.in) .

The format of application should be as below:-

To,

The Principal  
Innovative College of Pharmacy  
Knowledge Park-2, Greater Noida  
G. B. Nagar, U. P. - 201308

**Sub:**.....  
.....

Respected Sir/Madam,

I, (Student Name).....studying  
in(Course)..... (Semester)..... (Year) .....  
Roll No: ..... &Enrollment No: .....  
Batch..... Session .....  
(Issue).....  
.....  
.....  
.....  
.....

Thanking you

Your's sincerely

Student Name:  
Sign  
Date:

To,

The Principal  
Innovative College of Pharmacy  
Knowledge Park-2, Greater Noida  
G. B. Nagar, U. P. - 201308

**Sub:**.....  
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Respected Sir/Madam,

I, (Student Name) ..... studying in  
(Course)..... (Semester)..... (Year) .....  
Roll No: ..... & Enrollment No: .....  
Batch..... Session .....  
(Issue).....  
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Thanking you

Your's sincerely

Student Name:

Sign

Date: