

**NUST Business School (NBS)**

**STUDENT CONCERN FORM**

**(Related to Coordination Office)**

**Note: PLEASE FILL THE FORM & DESCRIPTION IN CAPITAL LETTERS**

**STUDENT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ REGISTRATION NO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PROGRAM BATCH & SECTION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SCHOOL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Cell No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SEMESTER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SUBJECT NAME & CODE CONCERN RELATED To \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**NATURE OF CONCERN Enrollment on CMS Name in Attendance Roaster**

**Enrollment on LMS Account Password Time Clash Information**

**CMS others LMS others Fee Activation status Repetition List**

**DESCRIPTION: (if needed)**

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**FORM SUBMISSION DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STUDENT SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**FOR OFFICE USE ONLY**

**Resolved Pending Referred To \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Remarks: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Action By / Action Date**

1. **Program Coordinator**
2. **CMS/LMS Coordinator**
3. **Asst. Program Coordinator**
4. **Referred Person**