

Registrar

## Sardar Patel University, Mandi



(A State Government University)

## APPLICATION FOR CASUAL LEAVE/COMPENSATORY LEAVE/RESTRICTED HOLIDAY

Name	
Designation	
Nature of Leave	
Period of Leave	
Number of Days of Leave	
Purpose of Leave	
Leave already taken	
Date:	Signature of Applicant
The above mentioned leave i	s Recommended/Not Recommended.
I certify that the above information is correct as per records.	
The above mentioned leave is	Signature of Authority (Pro-VC/Dean/HOD/Registrar/COE/FO) s Approved/Not Approved.
	Signature of Approving Authority