

“ESTABLISHMENT BRANCH”

Note:- Application should be submitted at least 15 days before the proposed date of availing.

I. To be filled by the Applicant

- 1. Name of the Applicant
- 2. Designation
- 3. Department/Office
- 4. Leave applied for with period & date of commencement
- 5. Dates/period to be Prefixed/Suffixed
Prefixed.....
Suffixed.....
- 6. Reasons for applying leave
- 7. Leave last availed of with period & date
- 8. Address for correspondence during leave
- 9. Contact telephone number during the period of leave
- 10. Total Teaching days in the Semester till date
- 11. Total leave already taken during teaching days
- 12. Arrangement during leave period
- 13. Signature of the faculty who has been assigned duty during leave period with name (lecture-wise)

Dated:-..... Signature of the Applicant

II. To be filled in by Supervising/Controlling Officer

- 1. I certify that the above information is correct as per records.
- 2. Leave applied for is
(Please indicate in own hand “ Recommended” or “Not Recommended”)
- 3. Reasons, if leave not recommended
- 4. Work of the Applicant will be looked after by the existing staff or Deptt./Office by internal adjustment.
- 5. In case of leave of Teacher, please indicate the name/designation of the Teacher who will look after the routine work of the Deptt. or attend classes of the Applicant during the leave period.
.....

Despatch No.....
Dated:

Signature of the Supervising Officer/
Controlling Officer with Official Stamp

(FOR USE IN THE OFFICE)

Leave case of

File No.

1. Total Leave due (as on.....)
2. Whether the leave applied is admissible or not YES/NO
3. Duration of leave proposed to be sanctioned:
.....
.....
.....
4. Recommending Authority : Pro-VC/Dean/HOD
5. Submitted for the kind approval/ex-post-facto approval of the
Please.

HOD

Dean

Pro-Vice Chancellor

Vice Chancellor

Registrar

Note: Maximum 10 teaching days only in a Semester will be allowed as any kind of leave.