

APPLICATION FOR DUTY LEAVE (Faculty / Scholars / Project personnel)

	National	/	International
1.	Name of the Applicant with Designation	:	
2.	Purpose of Duty Leave (Brief description)	: _	
3.	No. of days of leave required	:	
	From: Along with other leave CL /EL (Please mention along with prescribed leave From:	/ Othe	r ut a 'X' mark)
4.	Expected Date of Joining to the Institute	:	
5.	Address for communication during leave (Name of the Institute/Organization with phone number / e-mail etc if any)	:	
	Contact Cell. No. during the said Leave	:	
Da	ate:		Signature of Applicant
Re	commendation of Faculty-in-Charge (for so Leave recommended		- • -
]	Saculty-in-Charge / Project head
Approval of Sanctioning Authority Leave is granted / refused			

DIRECTOR