

Maulana Azad National Institute of Technology, Bhopal

(Application for CL/Special CL/Restricted Holiday/Duty Leave/HQ Leave)

Department/Center/Section _____

1. Name: _____ 2. Designation: _____

3. Type of Leave: _____ 4. Reason for Leave: _____

5. Total no. days of leave applied for _____ days, from _____ to _____

6. Prefix/ Suffix Holiday (if any) _____

7. Permission to leave Head Quarter (Yes/No) if yes; from _____ to _____

8. Address during leave _____

9. Contact No./Mobile No. _____ Email id: _____

10. Arrangement for duties during leave period:

i. Class arrangement (UG/PG) _____

ii. Departmental duties _____

iii. Administrative duties _____

iv. Any other (if any) _____

Date: _____

Signature of Applicant

FOR DEPARTMENT/CENTER/SECTION OFFICE USE ONLY

i. Recorded entry in leave register on page no. _____

ii. Total Leave availed so far during the current year: CL: _____ SPL. CL: _____ RH _____ DL _____

iii. Balance leave CL _____ SPL. CL _____ RH _____

Signature of Dealing Assistant

Forwarded/Recommended/Sanctioned/Not Sanctioned by HoD/HoC/Section Head

DEAN (FW)

DIRECTOR