

J.D. BIRLA INSTITUTE

Unit of Vidya Mandir Society

(Affiliated with Jadavpur University)

Recognised by UGC (12B & 2f)

Departments of Science, Commerce & Management

Main Campus: 11 Lower Rawdon Street, Kolkata-700020 Management Campus: 1 Moira Street, Kolkata-700017

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APPLICATION (LEAVE)							
Name of the Applicant	:						
Designation / Post	:						
Department	:						
Nature of Leave (please tick on the appropriate box)	:	P/l		M/I [C/I	Any Other
Total No. of Days	:						
Period of Leave	: From				To		
Ground on which Leave Applied for	:						
Date of resuming duty from Leave	:						
Address during Leave	:						
Phone No. / Mobile No.	:						
STATION LEAVING PERMISSION MAY BE GRANTED	:						
Date:						Sign	ature of the Applicant
	FOF	R OFFICE U	JSE				
		f Days of L					
Nature of Leave		Leave D	ue			Leave Ava	iled till Date
Earned Leave / Privileged leave (E/L or P/L) Medical Leave (M/L)							
Casual Leave (C/L)							
Any Other							
,							
Date:							Signature
REC	OMME	NDING A	UTHOR	RITY		_	Signatore
Remarks:							
RECOMMENDED / NC	OT RECO	MMENDED					
If recommended, please specify the name of the person who will work in							
place of his/her duty and if not recommenced, please specify reasons(s). This may be put on a separate sheet.						Signature of Co-ordinator	Departmental Head , / Manager (with date
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Remarks:							
SANCTIONED / NOT SANCTIONED					c: ·		A il *i / *il l · \
							Authority (with date)
				Not	ea the co	ntents of the s	anctioning authori