



SAGAR GROUP OF INSTITUTIONS, BHOPAL



SIRT/SIRTS/SIRTE/SIRT-P/SIRTS-P LEAVE APPLICATION FOR FACULTY / STAFF (BE / Pharmacy / MBA / MCA)

Institutes : SIRT/SIRTS/SIRTE/SIRT-/SIRTS-P (Please Tick) Date of Apply :-

Name Designation Department

Nature of Leave (CL / OD / LWP / SPL / SB / OPL) Duration Day(s)

Period of Leave on /w.e.f. to Reason (S) for Leave

Permission to leave the head quarter required from To

Leave Address:

..... Contact Phone No: Mob. No.

(.....)
Signature of Applicant

For Office use

Leave credited on the date of application CL SPL Total Day (s)

Balance : CL SPL Total Day (s)

Details of SPL.....

(.....)
Signature
Office Assistant / Reception
(.....)
Recommended / Not recommended
Dean / HOD

(.....)
Verified & Forwarded
Registrar / Dy. Registrar
(.....)
Approved / Not approved
Director / Dy. Director / Principal

Note : If any body wants to avail more than 3 days leave / long leave or some other special leave, intimation / information has to be given to Group OSD Officer (H.R.)