

GAUR COLLEGE OF EDUCATION

(Affiliated to Kurukshetra University, Kurukshetra & Approved by N.C.T.E, Jaipur)

14th K.M. Stone, Chandigarh Road, Behbalpur, Hisar

Application Performa for leave

1. Leave applied for : Casual Leave / Medical Leave / Extra Ordinary Leave
2. Name (In Capital Letter) : _____
3. Designation : _____ Regular / Adhoc _____
4. Date of Appointment : _____
5. Home Address : _____
(with Mob. No.) _____
6. Total Leave allowed during : _____ days
the year (1st Jan to 31st Dec)
7. Leave available till date : _____
8. Present Leave (w.e.f. _____ to _____ (Total Days ____))
9. Reason for Leave _____
(If medical leave, attach certificate issued by Registered Medical Practitioner)

Date :

Signature of applicant

For Office use only :

Total Leave allowed : _____
Leave already availed : _____
Present Leave : _____
Balance Leave : _____

Signature of the Office in – Charge

Sanctioned _____ days

Date :

Signature of
the Sanctioning Authority