

Application Form for Academic Leave

| | |
|---|---|
| 1. Name | |
| 2. Roll No. & Designation | |
| 3. Unit & Division | |
| 4. Date of Appointment | |
| 5. Purpose of Leave; <i>attach supporting documents</i> | |
| 6. Period of Intended leave | From : _____ to : _____ (_____ days) |
| 7. Financial Assistance to be Received | If less than the amount specified in Leave Rules to qualify as Leave with Pay, provide details and <i>attach supporting documents</i> ; otherwise, mention 'higher than Rs.2,00,000/- per month or equivalent of US\$9,000 per month pro rata', whichever is applicable |
| 8. Signature of Applicant with date | |
| For Office Use Only | |
| 9. Accumulated AL balance before this application | _____ days (total); _____ days (with pay) |
| 10. Recommendation of Unit Head ; give reasons if leave is not recommended | 11. Recommendation of Professor-in-Charge/Head, SOC & OR Division and Dean (if required) ; give reasons if leave is not recommended |
| Signature with date | Signature with date |
| 12. Sanction : Yes / No If Yes, with pay / without pay | |
| Signature of sanctioning authority with date | |