## SOBHASARIA GROUP OF INSTITUTIONS SIKAR

			APPI	<b>ICATION FOR</b>	R LEAVE		
1.	Name	2	:				
2.	Desig	gnation	:				
3.	Depar	Department /Section :					
4.	Type of leave applied for :			(Casual / Duty / Station / Academic			
5.	Period from leave		: From		To	(	Days
6.	Holid	lays (If to be combin	ned):				
7.	Purpo	ose / Reason	:				
Q	_			Contact No			
	Whether Classes/Duties arranged: (Yes/I						
9.	wnet	ner Classes/Duties a	arranged: (Yes/	NO)			
	S.N.	J. Year & Sem. Date		Time	Arranged by Name Signature		
	1.				rvaine	Sig	nature
	2.						
	3.						
			SARIA GR	OUP OF IN	STITUTIONS S		
1.	Name	<u>,                                      </u>	APPI	LICATION FOR	R LEAVE		
		gnation					
	_	rtment /Section					
	-	Type of leave applied for : (Casual / Duty / Station / Academi					
	• -	d from leave			To		Days
	Holidays (If to be combined):						•
		ose / Reason					
	•						
	Address During the Leave :Contact No						
9.	Whet	her Classes/Duties a	arranged: (Yes/l	No)			
	S.N.	Year & Sem.	Date	Time	Arrange		naturo
	S.N. 1.	Year & Sem.	Date	Time	Arrange Name		nature
		Year & Sem.	Date	Time	Ÿ		nature

Head of Department /Section

(Signature of Applicant)

Registrar Principal