

THAPAR POLYTECHNIC COLLEGE, PATIALA

APPLICATION FOR STATION/CASUAL LEAVE

ROUTE: HEAD DEPARTMENT/OFFICE SUPERINTENDENT

SANCTIONING AUTHORITY

NAME: _____

Designation: _____

Period for which leave is required _____

With dates

Reason for leave _____

Arrangements during leave period _____

(Please make arrangements for your periods/ work during your absence before proceedings on leave) _____

NOTE: - Leave should not be availed before getting it sanctioned

Recommendation

Signature of Applicant

HOD/I/C Section

Date: _____

(TO BE FILLED IN BY THE OFFICE)

Casual leave already taken during _____
The current year

Balance Casual Leave due _____

Casual leave from _____ to _____

Sanctioning Authority

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