



Staff Format No: 1

APPLICATION FOR CASUAL LEAVE

Name of the Applicant :

Designation with Department :

Number of days and dates on
which casual leave is required :

Reason for leave :

No. of days of leave already
availed of :

Whether the classes had been
arranged if so, detail thereof :

Signature with date :

Recommendation of the
Head of the Department :

Orders of the Pro Vice-Chancellor (Admin.) /: