

BIRLA INSTITUTE OF TECHNOLOGY MESRA, RANCHI

STATION LEAVING APPLICATION

(For Holidays / Weekly Off Days)

Name of the Applicant: _____ Employee Code: _____
Designation: _____ Department/Section _____
Station leaving from _____ (____ AM /PM) to _____ (____ AM /PM)
Reasons for Station leaving _____
Address while on Station leave _____
Contact Phone No _____ E-mail _____

Signature of the Applicant:

Date:

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Remark of Dean (FA) / HOD /Section In-charge

Signature with Date:

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Counter Signed by:

Vice Chancellor / Dean (Faculty Affairs) / Registrar

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FOR OFFICE USE

Station Leaving as above is recorded in the Leave Section.

Signature with Date of Dealing Assistant (Leave Section)

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