BIRLA INSTITUTE OF TECHNOLOGY , MESRA , RANCHI

Please tick the Box (√)   **Leave Application for Student**

CSIR/UGC	
Project	
Others	

Name of Student : _____   DOJ _____

Project Code/Scheme ID (For CSIR/UGC/DST):_____

Project Name/Scheme name (For CSIR/UGC/DST):_____

Designation (in project) :_____   Department: _____

Nature of Leave: _____   Period of Leave : From _____ to _____

Note: for medical reaison medical certificate should be attached.

Reason for Applying Leave: _____   Contact No. _____

Address While on Leave   : _____

_____

 Signature of Student: _____   Date:_____

Name of P.I.:_____ Signature of P.I. _____   Date: _____

For Departmental Office Use

No. of Leave already availed_____   Balance of Leave   _____   as on _____

Name of Office assistant   Signature of Office assistant

Signature of Head   Departmental Seal

Leave Sanction Order

Sanction of Leave by the sanctioning aurthority for _____ days of _____ Leave for the period

_____ to _____ is hereby conveyed to the concerned applicant / department.

Signature of Leave incharge

Approved / Not Approved

Department :

Signature of DRIE