

SRI VENKATESWARA COLLEGE

(University of Delhi)

Date:

CASUAL LEAVE APPLICATION FORM

 Name and Designation Number of Days applie Date (From	of the Applicant: ed for leave: To):		
4. Reason for leave			
/ln aa		ng out of Station Diagon Tick)	
	Itted to be away from e claiming Leave Tra	ng out of Station – Please Tick) I the Station during the leave peroid. avel Concession.	
Signature of the Applicar	t		
Recommended By ::	S.O. (Admn/Acts)/Te	acher – in – Charge/Technical Assist	ant/ Librarian.
			GRANTED
Dealing Assistant	,	Administrative Officer	Principal
	SRI VE	NKATESWARA COLLEGE (University of Delhi) Date	
551H1-3/h3	CACHAL	I EAVE ADDITION FORM	
	CASUAL	LEAVE APPLICATION FORM	
2. Number of Days applied	ed for leave: To):		
(In ca A) I may please be permi B) I will be claiming/not b	tted to be away from	ng out of Station – Please Tick) the Station during the leave period.	
C) Address during Leave	ū		
Signature of the Applicar	t		
Recommended by :: S.C	D. (Admn/Acts)/Teac	her – in – Charge/Technical Assistan	t/ Librarian
			GRANTED
Dealing Assistant	S.O.(Admn)	Administrative Officer	Principal