Shri Ramswaroop Memorial College of Engineering & Management

Tewariganj, Faizabad Road, Lucknow – 226028

SRMCEM/HR/Leave_Application/F/01

LEAVE APPLICATION

1. Name of Applicant: …….…..…….. 2. Empl_ID: E000000_ _ _ _

3. Department ……..…… 4. Designation: …….……..

5. Leave Applied from: ……..…… **to** ...…….

No. of days: …….……..

Type of Leave: ……..

6. Brief reason for Leave……..…….…….…….

7. **Appendix "A" Applicable for Teaching Faculty:** The details for the classes for which alternate arrangement is to be made fare given as Appendix "**A**"

Signature of Applicant
Date: ……..

FOR OFFICE USE ONLY

Debit: ……. days

Misc. Adjustment …….……..
……...……..

Signature of HR Resp.

Recommended / Not Recommended

Signature of HOD/AD
Date: ……

Sanctioned / Not Sanctioned

Signature of Associate Director (Admin & IQAC) / Director

Appendix "A"

Name of Applicant…… Date…….……

Department…….…… No. of days…….....

S. No.	Course	Day	Period	Room No	Subject	Alternate Arrangement	
						Name	Signature