

Maharana Pratap Horticulture University, Karnal

APPLICATION FOR LEAVE(EXCEPT CL/RH/SL)

FOR OFFICER OF THE UNIVERSITY

1. Name _____
2. Designation _____
3. Nature of leave applied for _____
4. Period of leave From _____ to _____ with permission to prefix _____ and suffix _____ holidays
5. Reason/purpose for leave is applied for _____
6. Date of return from last leave and the nature and period of leave _____
7. Permission for station leave _____
8. Address during leave _____

Tel. No. _____
Mob. No. _____

9. Certified that _____ (nature of leave) from _____ to _____ is admissible as per leave record. **Signature**

Signature of Reporting Authority

10. Approval of leave sanctioning authority
Dr. _____ will look after work during leave period.

Signature

Maharana Pratap Horticulture University, Karnal

APPLICATION FOR GRANT OF CASUAL LEAVE/RESTRICTED HOLIDAY/STATION LEAVE

For Officer of the University

1. Name _____
2. Designation _____
3. Period of CL/RH/SL applied for From _____ to _____ with
permission to prefix _____ and suffix
_____ holidays
4. Reason/purpose on which casual leave is
applied for _____
5. Permission for station leave _____
6. Address during leave _____

Tel. No. _____
Mob. No. _____
7. Leave in balance (including the leave
applied for)

Signature

8. Approval of leave sanctioning authority
Dr. _____ will look after
work during leave period.

Signature