Indian Institute of Technology GuwahatI

ACADEMIC AFFAIRS SECTION

LEAVE APPLICATION FORM

(for M.Tech/MDes/MS(R)/PhD./Dual Degree programs)

|  |  |  |
| --- | --- | --- |
| 1. | Name(IN BLOCK LETTERS) |  |
| 2. | Department/Centre/School |  |
| 3. | Roll No. |  |
| 4. | Nature & Period of Leave (Academic/ Personal/ Medical/ Unauthorized) | Nature | From | To | No. of days |
|  |  |  |  |
|  |  |  |  |
| 5. | Holidays, Prefixing/ Suffixing | Prefix | From: | To: | No. of days: |
| Suffix | From: | To: | No. of days: |
| 6. | Reason for Leave |  |
| 7. | Whether Station Leave permission required or not | Yes, From: | To: | NO |
| 8. | Address while on leave |  |
| Phone: E-mail: |

(Signature of the student) Date:

 Recommended/Not Recommended Recommended/Not Recommended

 (Signature of TA Faculty) (Supervisor’s Signature)

 **FOR OFFICE USE**

|  |  |  |
| --- | --- | --- |
| i. | Leave available before this application |  |
| ii. | Leave applied |  |
| iii. | Balance after current sanction |  |
| iv. | No. of days without scholarship |  |

 **Approved/Not approved/Recommended**

**Date:**  **(Signature of the Head of Department/Centre/School)**

**Date: Approved/Not approved**

 **(Signature of ADOAA(PG)/DOAA)**