



INDIAN INSTITUTE OF ENGINEERING SCIENCE AND TECHNOLOGY, SHIBPUR

Application of Leave / Extension of Leave for
Earned Leave/ Half-Pay Leave/ Commuted Leave

To: The Director

1.	Personal File No.:		3.	Designation :	
2.	Name :		4.	Department :	
			5.	Telephone No.:	
6.	Leave applied for:	From :		To :	
7.	Nature of Leave:		8.	Purpose :	
9.	Last Leave availed (including Date of Joining and Nature of Job) :				
10.	Whether Station Leave required (Yes / No)		If yes, mention (India / Abroad)		
11.	Address during Leave :				

Signature of the Applicant

The absence of the incumbent will not hamper the normal works/classes of the Department/School/Center concerned.*

Signature of The Director

* not applicable for leave on Medical Ground

(To be used in Administration Section)

The following leave is due on :

Following leave on the basis of the recommendations of the Head of Department/In-charge of Section may be sanctioned.

Balance of Leave : EL ▶

HPL ▶

Sr. Superintendent / Assistant Registrar

Dealing Assistant

Associate Dean Administrative affairs