

## LEAVE APPLICATION FORM

Student Name: keerthi

Student ID: tly22cs033

Department: cse

Register number: tly22cs033

Leave Type: medical (e.g Sick Leave / Casual Leave / Annual Leave)

Leave Duration: From 2025-04-18 To 2025-04-16

Total Days: 2

Reason for Leave: sick

Address during leave: abcd,acddea

I hereby request you to grant me leave for the above-mentioned period. I assure you that I will complete all pending work before my leave and will ensure a smooth handover to my colleague, if necessary.

Date of Application: 2025-04-24

Signature: \*sdddd\*\*

Approved By: asha

Date of Approval: 2025-04-17