

## LEAVE APPLICATION FORM

Student Name: keerthi

Department: cse

Register number: tly22cs033

Leave Type: medical

Leave Duration: From 2025-04-01 To 2025-04-16

Total Days: 2

Reason for Leave: fever and cold

Address during leave: sukritam,kallerikkara

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: 2025-04-10

Approved By: asha vijayan

Date of Approval: 2025-04-16