

SPECIAL LEAVE REQUEST FORM

To,
HD/CD
Division of Residential Services.

Date: /...../.....

SUBJECT:-.....

Reasons in brief :-(Please mention relevant reasons)

Note: Any type of leave requested/sanctioned in this request form pertains to leave from HOSTEL ONLY and has NO CONCERN WITH ACADEMIC LEAVE. Student is responsible for shortage of his/her academic attendance.

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(Signature of the Student)

Name of the Student:

Reg. No. / ID:

Address:.....

Programme/Dept:**Sem.**.....

Hostel:**Block**.....**Room No.**

Contact No:

Recommendation / Remarks (Where Applicable) :-

Parent's Consent:

(Consents in writing below or by fax)

Recommendations of

concerned institutes/Dept:

Wardens

(In case of Out of campus events)

Recommendation/Sanctioning :

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Signature

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Signature (WARDEN)

Remarks :

ODRS:

Recommendation /Approval

HD/CD

Approved / Not Approved

Pro Chancellor

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