

SPECIAL LEAVE REQUEST FORM

To,
HD/CD
Division of Residential Services.

Date: / /

SUBJECT:-.....

Reasons in brief :-(Please mention relevant reasons)

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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:
Address:.....
Hostel:Block.....Room No.

Reg. No. / ID:
Programme/Dept:Sem.....
Contact No:

Recommendation / Remarks (Where Applicable) :-

Parent's Consent:
(Consents in writing below or by fax)

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Recommendations of
concerned institutes/Deptt:
(In case of Out of campus events)

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Signature

Wardens
Recommendation/Sanctioning :

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Signature (WARDEN)

Remarks :
ODRS:

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Recommendation /Approval
HD/CD

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Approved / Not Approved
Pro Chancellor

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