



Date

To,

The Head of the Department
Department of Computer Applications
Chitkara University,
Punjab

Subject: Request for Medical Leave.

Dear Sir,

This is to request you to kindly grant my ward _____ College
Roll No. _____, Sem _____, Medical Leave from
_____ to _____ as per the norms of
University. He / She is suffering from _____
disease.

I hope you will consider my request. The medical certificate is attached herewith.

Your's truly,

(Signature of Parent/Guardian)

(Name of Signatory in Capital Letters)

(Mobile Nos. _____)

For Office Use

Mentor's Remarks: -

.....
.....

Signature of Mentor
(Full Name)

Date

CHITKARA
UNIVERSITY