



**MAR BASELIOS CHRISTIAN**  
COLLEGE OF ENGINEERING & TECHNOLOGY, PEERMADE

**STUDENT LEAVE APPLICATION FORM**

(College Copy)

388442

Class : SE, CSE Date of Issue : 25/03/2023 No: 30  
Admission No : 5655 Name : Safal N  
Leave from : 14/02/2023 Leave to : 14/03/2023 No of Days: 30  
Nature of leave Casual Leave ☐ Medical Leave ☒ Duty Leave ☐  
Reason for leave: Sinusitis infection

Signature of student: [Signature] Signature of Parent/Guardian/ Warden: \_\_\_\_\_  
Recommendation of Faculty Advisor

[Signature]  
Signature of Faculty Advisor

[Signature]  
Signature of HOD

[Signature]  
Signature of Principal

\* In case of Medical Leave, Medical Certificate should be attached and duly signed by the Principal within 7 days.  
NB: Duly signed leave form and copy of the Medical Certificate should be submitted to the Chief Faculty Advisor within 7 days



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[Signature]  
Signature of Student

[Signature]  
Signature of Faculty Advisor

[Signature]  
Signature of HOD/Principal



# MEDICAL CERTIFICATE

Signature of Applicant

*Safal*

I, Dr *Ajmal K Salim*

after careful personal examination of the case hereby certify that Sri/Smt

*Safal N* whose signature is given above is suffering from *Sinusitis Infection* and

that I consider that a period of absence from duty of *30 - days* with effect from *14/2/25* to *14/3/25* is absolutely necessary for the restoration of his/ her health.



Signature

*[Signature]*

(Seal) **DR. AJMAL K SALIM, MBBS**

**TCMC REG: 95276**

Place

*Malleppally*

Date

*14/3/25*

Post :

*Malleppally*

System of Medicine

Reg. No.