SVKM's NMIMS Mukesh Patel School of Technology Management & Engineering

Application Form for Leave of Absence from Student

Date:

Name of Student:	Roll Number:				
		SAP Number:			
Contact Phone number:	Email ID:				
Programme:	Branch:				
Semester:	Division:				
Parent's Contact number:	Email ID:				
Reason of Absence: Medical	/ Placement Activ	vity / Event Participation	n through College		
/ Death in family / Oth	er (Tic	${f ck}$ ' $\sqrt{\ '}$ on appropriate reason (of absenteeism)		
Dates: From(dd/mm/yy)	to(dd/mm/yy)	Total Days:			
(Provide evidence wherever	necessary) – Documents A	ttached YES / NO]		
NOTE: Medical Certificate 1	nust be duly signed and sta	mped from Registered Physici	<mark>an</mark>		
Details of Lectures/ Practical	's missed [Attach extra sh	eet if required]			
Name of Subject	Lecture- Date & Time	Practical Date & Time	Faculty Name		
1. 2.					
3.					
4.					
5.					
80% attendance in each subject for each subject. I understand suitable action in accordance v	et for the Semester. I unders that I do not meet the course with the prevailing attendance	o the best of my knowledge. I ust tand that all Leave must remain requirements in the event that me rules may be taken by the mananissed during this absenteeism.	within a maximum of 20% y absence exceeds 20% and		
Name & Signature of parents :		Signature of Student:			
Date:		Date:			
Approved by:					
Signature of HOD/Chairperson Date:		Signature of the Recipient and D	vate:		

Note: This form along with supporting documents must be submitted within 3 days after resuming the college in case of unforeseen conditions [Sickness /Death in family etc.].

Name of Subject	Lecture- Date & Time	Practical Date & Time	Faculty Name
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