

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

**Application Form for Leave of Absence from Student**

**Date:**

<b>Name of Student:</b>	<b>Roll Number:</b>
	<b>SAP Number:</b>
<b>Contact Phone number:</b>	<b>Email ID:</b>
<b>Programme:</b>	<b>Branch :</b>
<b>Semester :</b>	<b>Division:</b>
<b>Parent's Contact number:</b>	<b>Email ID:</b>

<b>Reason of Absence :</b> Medical <input type="checkbox"/> / Placement Activity <input type="checkbox"/> / Event Participation through College <input type="checkbox"/> / Death in family <input type="checkbox"/> / Other <input type="checkbox"/> (Tick '√' on appropriate reason of absenteeism )			
<b>Dates:</b> From _____ to _____ Total Days: _____ (dd/mm/yy) (dd/mm/yy)			
( Provide evidence wherever necessary ) – Documents Attached YES <input type="checkbox"/> / NO <input type="checkbox"/>			
<b>NOTE: Medical Certificate must be duly signed and stamped from Registered Physician</b>			
<b>Details of Lectures/ Practical's missed [Attach extra sheet if required]</b>			
<b>Name of Subject</b>	<b>Lecture- Date &amp; Time</b>	<b>Practical Date &amp; Time</b>	<b>Faculty Name</b>
1.			
2.			
3.			
4.			
5.			
I hereby declare that the reasons stated above are genuine to the best of my knowledge. I undertake to maintain at least 80% attendance in each subject for the Semester. I understand that all Leave must remain within a maximum of 20% for each subject. I understand that I do not meet the course requirements in the event that my absence exceeds 20% and suitable action in accordance with the prevailing attendance rules may be taken by the management in this regard. I will be responsible for all term work / evaluations etc, which I missed during this absenteeism.			
<b>Name &amp; Signature of parents :</b> _____		<b>Signature of Student:</b> _____	
<b>Date:</b> _____		<b>Date:</b> _____	

Approved by:

Signature of HOD/Chairperson  
 Date:

Signature of the Recipient and Date: \_\_\_\_\_

**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.].**

<b>Name of Subject</b>	<b>Lecture- Date &amp; Time</b>	<b>Practical Date &amp; Time</b>	<b>Faculty Name</b>
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