



جامعة التقنية
والعلوم التطبيقية نزوى

University of Technology and Applied Sciences - Nizwa

ENGINEERING DEPARTMENT - M&I Section



STAFF LEAVE FORM

Date: 17.02.21

Semester: 2

Academic year: 2020-2021

Name of Staff: Mr. Prabakaran T

Mobile number: 91170879

Email: thiyagarajan.prabakaran@nct.edu.om

☒ M&I Section

☐ Electrical Section

☐ Applied Science

Applying for:

☒ Standard Leave

☒ Internal Leave

☐ Unpaid leave

☐ Hajj

☐ Other.....

Dates requested: from 24/02/2021 to 24/02/2021

No. of day(s): 1

☐ Short Leave

Reason for requested leave.....

Time requested: from.....to.....

No. of Hours:

Alternate classes arrangements are needed: ☒ Yes

☐ No

Arrangement details / in the attachment: B.Tech- MIME4140-CAD/CAM (Lab) class is arranged with Mr. Shanmugan

Staff Name & Signature:

T. Prabakaran

Date: 17.02.21


HoS Remarks & Signature

Class altered. Recommended for HoD's approval.

HoD Approval

Shanmugan
18/2/21
Approved

**Details of Class arrangement:**

Date & Time	Class & Venue	Alternative staff & Signature
24.02.2021 08.00 to 10.00 am	MIME4140 CAD/CAM B108	Mr. Shanmugan  17.2.21

Roll Number:	ZZ06000052	Application Number:	210310482798	Photograph 
Candidate's Name :	DARSHINI P.S	Father's Name	PRABAHARAN T	
Gender :	Female	Date of Birth :	05-06-2004	
Category :	OBC- NCL (CENTRAL LIST)	Person With Disability (PwD):	NO	
Scribe :	NA			
		Candidate's Signature		

Test Details	
Question Paper Medium	English
Paper	B.E./B.Tech. Only
Date of Examination	24.02.2021
Reporting / Entry Time at Centre	08:20 A.M (IST)
Gate Closing Time of Centre	08:30 A.M (IST)
Timing of Test	9:00 A.M. to 12:00 (Noon) (IST)
Test Centre No	ZZ0601
Venue of Test	Indian School MuscatPB 2470 PC 112DarsaitNear Indian Social ClubMuscatMuscat - NULL
SELF DECLARATION (UNDERTAKING)  Senior Director - NTA	

I, DARSHINI P.S, resident of NIZWA NIZWA 611, do hereby, declare the following:

1. That, I have read the Instructions, Guidelines and relevant orders pertaining to COVID-19 pandemic. I have read Information Bulletin, Instructions and Notices related to this examination available on the website 'https://jeemain.nta.nic.in'

2. I have in the last 14 days (please tick, wherever it is applicable to you, otherwise leave blank):

a) The following flu-like symptoms:

Fever: ☐ Cough: ☐ Breathlessness: ☐ Sore throat / Runny Nose ☐ Body ache: ☐
 Other- Please specify: _____

b) been in close contact with a confirmed case of the COVID-19. ('Close contact' means being at less than one meter for more than 15 minutes. ☐

c) not been in close contact with a person suffering from COVID-19 and am NOT under mandatory quarantine. ☐

d) travelled the following cities/ country in the last 14 days prior to arriving at the Centre. ☐

	1st City	2nd City	3rd City	4th City
Name of cities/country				
Date of Arrival in Centre City				

3. The health and wellbeing of our community is our first priority; therefore the centre reserves the right to deny entry to its premises.

4. I have read the detailed "IMPORTANT INSTRUCTIONS for CANDIDATES" as given on Page-2 and "ADVISORY for CANDIDATES REGARDING COVID-19" as given on Page-3 and I undertake to abide by the same.

Candidate's Photo (Same as uploaded on Application Form to be pasted before reaching the centre)	Candidate's left hand thumb impression (To be put before reaching the centre)	Candidate Signature (To be signed, On the day of Examination in presence of invigilator only)
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The above undertaking has to be filled up in advance before reaching the centre, except candidate signature which has to be done in the presence of invigilator.