

# LEAVE APPLICATION

|                   |   |                            |
|-------------------|---|----------------------------|
| NAME OF APPLICANT | : | <b>Dr. A.B.</b>            |
| DESIGNATION       | : | <b>Associate Proffesor</b> |
| NO OF DAYS        | : | <b>6</b>                   |
| REASON            | : | <b>Vacation</b>            |
| GROUP             | : | <b>Faculty</b>             |
| SEX               | : | <b>Male</b>                |

Dr. Xyz  
(Assistant Registrar)