



Eastern University

Received Date

Filled up by HR Section

Leave Application Form

NB: Need to submit 3 working days ahead of the commencement of leave

Name of Applicant: Employee ID

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Please don't forget to fill up Employee ID

Department: Designation:

Nature of leave applied for (please tick only one):

Casual ☐ Earned ☐ * Medical ☐ ** Duty ☐

Study ☐ Maternity ☐ Special ☐

*** In case of Medical leave, Medical Certificate is required.**

**** In case of Duty Leave, Office order is required.**

Reason for leave:

Duration of leave: From:.....to:..... Total days:

Contact address during leave:

Telephone / Mobile:.....

Responsibilities handed over to (if applicable):

Signature of the person taking over the responsibility:

Date: Signature of the applicant:

Comments / Recommendation by Dean/Advisor of Faculty/ Chairperson/ Registrar/ Deputy Registrar/Deputy Controller of Exam/Deputy Director/Deputy Librarian:

(Signature & date)

To be filled in by the office:

Type of Leave:

From: to: Total days:

Payment status: Full Pay ☐ No Pay ☐ Others

Leave status:

Type of Leave	Annual Leave Entitlement	Present balance	Day(s) applied for	Balance after this occasion	Remarks (if any)
Casual Leave	15 days				
Earned Leave	12 days				
Medical Leave	7 days				

Registrar/Vice Chancellor