

Parent's Consent Form

To

The Warden

SR _____ Bhawan

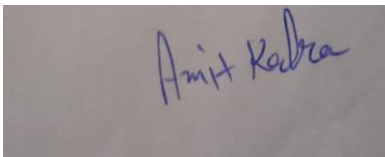
BITS Pilani, Pilani Campus

Dear Madam/Sir,

I, mother/father of VYOMA KALRA_bearing ID Number 2023B1PS0831P_I, am aware of my child applying for leave from 25-01-2024 to 29-01-2024. Kindly grant her/him leave for the above-mentioned time period.

I understand that this leave is granted with the assumption that my child is solely responsible for all the academic assignments of the respective courses that s/he is currently enrolled in.

Thanking You,



(Signature)

FullName:

AMIT

KALRA

Place:ratan lal nagar

Date:24-01-2024

Mobile Number:7416845949