

**BHAI GURDAS GROUP OF INSTITUTIONS**  
**SANGRUR-148001 (Pb.)**

**LEAVE APPLICATION FORM**

Name of Institute \_\_\_\_\_

Name \_\_\_\_\_ Designation \_\_\_\_\_ Deptt. \_\_\_\_\_

Period of Leave \_\_\_\_\_ Date \_\_\_\_\_ Nature of Leave \_\_\_\_\_

Purpose of Leave \_\_\_\_\_

Holidays prefix/suffix \_\_\_\_\_

Contact No. & address (if going out of station) \_\_\_\_\_

1. Duties will be performed by (Name & Sign.) \_\_\_\_\_

2. Subject \_\_\_\_\_

3. Lecture Room \_\_\_\_\_

4. Topic \_\_\_\_\_

Signature of the applicant with date

5. Teachers Remarks \_\_\_\_\_

Recommendation by HOD : Recommended/Not Recommended

Signature of the HOD with date

Approval by the Director/Principal : Approved / Not approved

Signature of the Principal/Director with date

**FOR OFFICE USE ONLY**

Leave \_\_\_\_\_ (As on the end of previous

Leaves to be availed \_\_\_\_\_

Balance \_\_\_\_\_

Remarks by te Accountant : With pay / Without pay

Signature of the Accountant / Supdt.