



Application for Special Leave / Special Casual Leave

To: **Dean, Faculty Affairs / Dean, Administrative Affairs**

1.	Personal File No.:		3.	Designation :	
2.	Name :		4.	Department :	
5.	Telephone No.:		6.	Leave applied for:	From : <input type="text"/>
7.	Nature of Leave:		8.	Purpose:	
9.	Whether Station Leave required (Yes/No.):		10.	Name & Address of Host Institution / Organization:	
11.	Whether Remunerative : mention (Yes / No)		12.	Source of TA/DA:	
13.	Arrangement of Classes:		14.	Other information, if any :	

Forwarded & Recommended by

Signature of the Applicant

Signature of the Head of the
Dept./School/Center

(For Office Use Only)

for Special Leave (stike off if not applicable)	Approval (Sanctioned / Not Sanctioned)	Number of days admissible in the Academic Year (20.....)	Number of day(s) already Aailed	Number of day(s) now Applied	Balance day(s)
			15 (Fifteen)		
Signature of the Dean, Administration/the Dean, Faculty Affairs IEST, Shibpur					

for Special Casual Leave (stike off if not applicable)	Approval (Sanctioned / Not Sanctioned)	Number of days admissible in the Academic Year (20.....)	Number of day(s) already Aailed	Number of day(s) now Applied	Balance day(s)
			15 (Fifteen)		
Signature of the Dean, Administration/the Dean, Faculty Affairs IEST, Shibpur					

Signature of the Director

* In case of Leave applied for going abroad