



# APPLICATION FOR LEAVE

University of Ladakh, Administrative Office, Melongthang, Leh Ladakh - 194101

<b>Name of the Applicant:</b>	
<b>Designation:</b>	<b>Department:</b>
<b>Nature of Leave:</b> CL/EL/ML/DL/Station Leave/Half Day Leave/Special Leave (need supporting documents)	
<b>Purpose of Leave:</b>	
<b>Period of Leave Required: From..... To:.....</b>	
<b>Total Days Leave: .....</b>	
<b>Contact No. on Leave:</b>	<b>Date of Application:</b>
<b>Name and Signature of the Reliever</b>	<b>Signature of the Applicant</b>
<b>Remarks of the Coordinator:</b>	
<b>Signature of the Coordinator</b>	

### Office Report

### Statement of Leave Taken:

Kind of Leave	Leave Available	Leave Approved	Leave Remaining
A. Casual			
B. Earned			
C. Medical			
D. Special			

<b>Remarks:</b>
<b>Signature of Asstt. Registrar/Recto</b>

Leave Approve/Nor Approved: .....

Signature of HVC/Registrar

### Acknowledgement Report of Leave Application University of Ladakh

<b>Name of the Applicant:</b>	
<b>Designation:</b>	<b>Department:</b>
<b>Nature of Leave:</b> CL/EL/ML/DL/Station Leave/Half Day Leave/Special Leave (need supporting documents)	
<b>Period of Leave Required: From..... To:.....</b>	
<b>Total Days Leave: .....</b>	
<b>Leave Approved/Not Approved: .....</b>	
<b>Signature of Superintending Officer</b>	<b>Signature of Registrar</b>