



राष्ट्रीय विज्ञान शिक्षा एवं अनुसंधान संस्थान (नाइसर), भुवनेश्वर
NATIONAL INSTITUTE OF SCIENCE EDUCATION AND RESEARCH
BHUBANESWAR

APPLICATION FOR CASUAL LEAVE / SPECIAL CASUAL LEAVE

1. Name of the employee & P.F. No.: _____
 2. Designation: _____ School _____
 4. Leave required for: _____ day(s) from _____ to _____
 5. Purpose of Leave: _____
(in case of S.C.L., please enclose the supporting documents)
 6. Provide the address & contact if leaving headquarter: _____

 7. Contact mobile/Tel. No. : _____
 8. Specify the arrangements made for the scheduled classes and labs: _____

- Date : _____

Signature of the applicant

Recommendation of Chairperson of the School

Leave recommended / not recommended

Special remark if any: _____

_____ .

Signature

FOR OFFICE USE

<u>Leave Status</u>	<u>Approval of Sanctioning Authority</u>
Leave(s) in account: _____	Granted/Refused
Dealing Asst.	FIC – Faculty Affairs