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**NATIONAL INSTITUTE OF TECHNOLOGY, UTTARAKHAND**

Ref. No. \_\_\_\_\_

Date: \_\_\_\_\_

**APPLICATION FOR EARNED LEAVE (CONTRACT EMPLOYEES)**

1. Name : \_\_\_\_\_
2. Designation : \_\_\_\_\_ Date of Joining: \_\_\_\_\_
3. Department/Section : \_\_\_\_\_
4. No. of days leave required with date : From \_\_\_\_\_ To \_\_\_\_\_ /on \_\_\_\_\_ Total: \_\_\_\_\_
5. Prefixed/Suffixed : Prefixed: \_\_\_\_\_ Suffixed: \_\_\_\_\_ Total: \_\_\_\_\_
6. Station Leave required : From \_\_\_\_\_ To \_\_\_\_\_ /on \_\_\_\_\_ Total: \_\_\_\_\_
7. Reason for Leave : \_\_\_\_\_
8. Complete address during leave with mobile no. : \_\_\_\_\_
9. Alternate arrangements for Administration work:-

S.No.	Date	Time	Name of the Faculty/Staff	Assigned duties	Signature

Date: \_\_\_\_\_

Signature

Forwarded  Not Forwarded

**Counter signature of Section Head/HoD/Incharge**

**FOR OFFICE USE ONLY**

- a) Leave at Credit : \_\_\_\_\_ Day(s)
- b) Leave taken now : \_\_\_\_\_ Day(s)
- c) Balance of Leave (a-b) : \_\_\_\_\_ Day(s)
- d) Leave Without Pay : \_\_\_\_\_ Day(s) - LWP shall be deducted from the month of \_\_\_\_\_

Dealing Assistant

Superintendent/Technical Asstt.

Approved  Not Approved

**HoD/Section Head/Incharge**

To,  
The Registrar Office