

राष्ट्रीय प्रौद्योगिकी संस्थान, उत्तराखण्ड  
**NATIONAL INSTITUTE OF TECHNOLOGY, UTTARAKHAND**

Ref. No.: NITUK/Estt./2016/00/001/A-149

Date: 26 MAY 2016

**OFFICE ORDER**

All HoDs and members of Faculty should observe following procedure for vacation:

1. No application for vacation shall be entertained.
2. The vacation plan shall be submitted by HoD to the Establishment Section in the attached format.
3. No detention shall be permitted without due justification at any time.
4. Institute reserves the right to cancel the vacation of any staff at any time.
5. Deans, Associate Deans and HoDs must discuss their detention plan with the Director before sending, the detention plan to the Establishment section.
6. Wardens and Associate Wardens should confirm their detention plan with Chief Warden.
7. Charge of a teaching staff during vacation or otherwise cannot be given to Non-teaching staff without explicit permission from the Director. If done so, it should be viewed seriously.
8. One faculty per department must be detained to have the charge of HoD on any day including holidays.
9. One faculty must be available from amongst the Warden / Associate Warden to take care of the hostels.
10. Those faculty/Trainee Teacher who are availing Special Casual Leave for continuing their M.Tech./Ph.D. should give a separate plan of spending their vacation at the Institute of their M.Tech./Ph.D. in the format attached.

In the event of emergent situation arising out at exceptional/unavoidable circumstances cropped up at the last moment, applications will be considered only with due approval of the competent authority.

These instructions should be noted for strict compliance. Any departure or violation will be viewed seriously.



**Director**

Copy to:

1. All faculty member/Trainee Teachers
2. Assistant Registrar (Admin)
3. PA to Director
4. PA to Registrar
5. Guard file – for record

Department: \_\_\_\_\_

**Compulsory spending of vacation for 45 days at place of Ph.D. Registration for availing Special Casual Leave**

S. No.	Name of faculty	Designation	Place of Registration	Stay at place			Contact, Phone no. & email ID of the Supervisor
				From	To	Total Days	
1							
2							
3							
4							
5							
6							

Sign of HoD: \_\_\_\_\_



Department: \_\_\_\_\_

**Detention plan for Summer 2016 vacation**

S. No.	Name of faculty	Designation	Detention Period			Purpose of Detention	Details of leave during vacation datewise	Details of Charge handed during vacation datewise
			From	To	Total Days			
1								
2								
3								
4								
5								

In the event of emergent situation arising out at exceptional/unavoidable circumstances cropped up at the last moment, applications will be considered only with due approval of the competent authority.

Sign of HoD: