BLDEA's

Vachana Pitamaha Dr. P.G. Halakatti College of Engineering & Technology, Vijayapur – 586 103.

Leave Application Form

| Employee Name : | | Employee Number : | | |
|---|------------------|--|-------------------------|------------------|
| Designation: | | | Department: | |
| Reporting to : The Principal, BLDEACET, Vijayapur. | | | | |
| Type of Leave CL / EL / Commuted Leave/Special Casual Leave | From DD/MM/YY | To DD/MM/YY | Total Number of Days | Reason for Leave |
| | | | | |
| Signature : | Date : | | Time: | |
| I will share his/her work load during his/her leave period | | | | |
| Name: Signature: | | | | |
| Leave at Credit : | | Leave enjoyed : | | |
| Comments | | Approved / Not Approved / Please Discuss | | |
| Recommendation of HoD | | | | |
| Recommendation of Principal | | | | |