

SREE NARAYANA COLLEGE CHENGANNUR

APPLICATION FOR CASUAL LEAVE

Name of applicant :

Designation :

No. of days and dates of leave required :

No. of days of C/L availed of during the current year :

No. of days of C/L availed of during the current term :

Details of work of the teacher on the above days :

Reasons for taking leave :

Signature of the applicant with date :

Recommendation of the Head of the Dept. with date :

Order or remarks and signature of the Head of the Institution

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