Date:-----------------------

SUBJECT: Application for Leave on duty.

Name:------------------------------------------------------------------------------------------------------------

Designation:--------------------------------------- Department:--------------------------------------

Details:

|  |  |  |  |
| --- | --- | --- | --- |
| Leave Period Date | Total Days | Particulars (Attach Relevant document) | Address phone while on leave |
|  |  |  |  |

Leave on duty as above may kindly be sanctioned

Signature of applicant

(Recommended / Not Recommended) (Recommended / Not Recommended)

(Signature of HOD) PRINCIPAL

**………………………………………………………………………………………………………………………**

**WORK LOAD ARRANGEMENT**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date | Period / Class | Subject | Name of Substitute | Sign of Substitute |
|  |  |  |  |  |