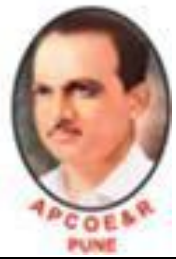
	<b>Akhil Bharatiya Maratha Shikshan Parishad's Anantrao Pawar College of Engineering &amp; Research</b>		
	<b>Record No.:</b> ADM/D/034A <b>Revision:</b> 00	<b>DoI:</b> 01/02/2025	
<b>Leave Form</b>			

Date: / /2026

**APPLICATION FOR \_\_\_\_\_ LEAVE**

Name of Applicant \_\_\_\_\_ Designation: \_\_\_\_\_

Department \_\_\_\_\_ Leave Applied \_\_\_\_\_ Days from / /20 to / /20

Detail reason for Leave: \_\_\_\_\_

Contact Address (During Leave Period): \_\_\_\_\_ Mobile No.: \_\_\_\_\_

**Signature of Applicant**

**WORK LOAD ARRANGEMENT**

Date	Period / Class	Subject	Name of Substitute	Sign of Substitute

**Recommendation of H.O.D. / In-Charge**

Leave Allowed /Not Allowed

(All Entries are necessary)

Signature: \_\_\_\_\_

**For Admin Department**

Leave Type	C.L.	M.L.	E.L.	SPL	C.O.	
Total Leave						
Leave Already Availed						
Now Applied						
Balance Leave						

**Establishment Clerk:**

**Office Superintendent**

Sanctioned	Not Sanctioned

**Principal**