



# SHAHEED BHAGAT SINGH COLLEGE

( University of Delhi )

**NEW DELHI**

LEAVE APPLICATION

DAIRY NO. ....

DATE OF RECEIPT .....

DIARIST

## LEAVE APPLICATION FOR NON-TEACHING STAFF

1. Name of Applicant .....
2. Post Held .....
3. Office / Accounts / Library .....
4. Sunday & Holidays, in any proposed to be prefixed / suffixed to leave .....
5. Date/s and Nature of Leave applied for .....
6. Ground on which leave is applied for .....
7. Address during leave .....
8. Certified that this is the minimum period of leave required by me.

Date .....

Full Signature of Applicant

**LEAVE RECOMMENDED / NOT RECOMMENDED**

Date .....

S.O.(ADMN) / A/CS / LIBRARIAN

Adm. Officer / Principal

## FOR OFFICE USE

Casual / R.H. / Medical / Earned Leave Due \_\_\_\_\_ days.  
Leave applied may kindly be sanctioned.

**DEALING ASSISTANT**

Dated .....

S.O.(ADMN.) / Adm. Officer

Principal