

Brainware University
398, Ramkrishnapur Road, Barasat, Kolkata- 700125

Leave Application Form

(Updated on 15th January, 2020)

Date: ___ / ___ / _____

Name: _____

Designation: _____

Department: _____

Leave at in hand as of application date

CL	<input style="width: 40px; height: 25px;" type="text"/>	ML	<input style="width: 40px; height: 25px;" type="text"/>	EL	<input style="width: 40px; height: 25px;" type="text"/>
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Nature of Leave Applied for:

Casual Leave / Medical Leave*/ Earned Leave / Leave without pay / ½ Day (Forenoon / Afternoon)

Reason of Leave: _____

Date and Days of Leave/s Applied for:

Number of classes to be missed on account of this absence (for Academic Staff): Theory Practical

<input style="width: 40px; height: 25px;" type="text"/>	<input style="width: 40px; height: 25px;" type="text"/>
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Signature of the Applicant

Views of DEAN / HOD / Department-In-Charge:

Signature of DEAN / HOD / Department-In-Charge

Approved / Not Approved

Pro Vice- Chancellor/ Registrar

*A Medical Certificate should be attached to the application on medical ground in case the leave is for more than three (3) days.