

**Department Post Graduate Committee  
Department Of Civil Engineering  
Indian Institute of Technology**

**Request for Vacation/Casual/Medical Leave**

**Note: Please read the leave rules on the reverse of this form before filling the form.**

Name: \_\_\_\_\_ Roll. No. \_\_\_\_\_ E-mail ID \_\_\_\_\_

Program: PhD/M.Tech./Dual Degree (Circle one) Specialization: \_\_\_\_\_

Academic Year \_\_\_\_\_ Semester: I/II/Summer (Circle one)

Type of Leave Applied: 1. Vacation Leave / 2. Casual Leave/ 3. Medical Leave (Circle one)

No. of Days: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Purpose of Leave: \_\_\_\_\_

\_\_\_\_\_  
(Program Advisor) (TA Advisor) (Student)

Date: \_\_\_\_\_

\_\_\_\_\_  
(Convener, DPGC) Date: \_\_\_\_\_

**DPGC Copy**

Name: \_\_\_\_\_ Roll. No. \_\_\_\_\_ E-mail ID \_\_\_\_\_

Program: PhD/M.Tech./Dual Degree (Circle one) Specialization: \_\_\_\_\_

Academic Year \_\_\_\_\_ Semester: I/II/Summer (Circle one)

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No. of Days: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Purpose of Leave: \_\_\_\_\_

\_\_\_\_\_  
(Program Advisor) (TA Advisor) (Student)

Date: \_\_\_\_\_

\_\_\_\_\_  
(Convener, DPGC)

Date: \_\_\_\_\_

**(For Official Use Only)**

S.No.	Item	Vacation	Casual	Medical
1	Leave availed in previous semester		XXXX	
2	Leave carried over		XXXX	
3	Leave availed this semester			
4	Leave balance available			

Leave applied

Leave Balance

Checked By: \_\_\_\_\_

Date: \_\_\_\_\_