## **LEAVE APPLICATION FORM FOR FARE FELLOW**

| Name of Student:  |  |  |
|---|--|--|
| FARE ID:  | Dept:                                    | Ph.D Email ID:   |
| Date of Joining FARE:   |  | Date of Ending FARE:   |
|   | LEAV                                     | <u>/E APPLIED FOR</u>  |
| 1. Academic Leave: From<br>(A FARE Fellow will be eligible_   | for a maximum of 12 days                 | to to  |
| 2. Personal Leave: From<br>(A FARE Fellow will be eligible)   | for a maximum of 30 days                 | to to  |
| 2. Casual Leave: From<br>(A FARE Fellow will be eligible_   | for a maximum of 8 days o                | to   |
| 3. Medical Leave: From  |  | to   |
| (Leave on medical ground witho<br>in a complete tenure on pro-rata<br>NOTE: Attach medical certific | <i>basis)</i><br>cate for medical leave. | to   |
| Purpose of Leave:   |  |  |
| Address of Leave:   |  |  |
| Applied Dated:  |  |  |
|   |  | e and no of days:  |
|   |  | ce with duly forwarded from thesis supervisor and HoD well in adva<br>r medical leave is emergency situations. |

- Encashment of any balanced un-availed leave in shall not be permitted.
- Approval of leave is completely depend on competent authority.

| Signatures: | (Student) | (Thesis Supervisor) | (Head of the Department) |
|-------------|-----------|---------------------|--------------------------|

## For Official Use Only

| Academic Leave | Personal Leave | Casual Leave   | Medical Leave  |
|----------------|----------------|----------------|----------------|
| Accumulated:   | Accumulated:   | Accumulated:   | Accumulated:   |
| Leave Applied: | Leave Applied: | Leave Applied: | Leave Applied: |
| Sanctioned:    | Sanctioned:    | Sanctioned:    | Sanctioned:    |
| Balance:       | Balance:       | Balance:       | Balance:       |

Leave Approved (if rejected mention the reason): \_\_\_\_\_

Any Remarks: \_\_\_\_\_

Recommended by AR/DR/JR (Academic Affairs)

Approved Dean (Academic Affairs)