

INDIAN INSTITUTE OF TECHNOLOGY, KANPUR
Department of Mechanical Engineering

Leave applied for Post graduate Students

Name _____ Roll No. _____

Type of Leave: **-Casual/Vacation/Medical**

(Strike out which is not applicable)

Period Leave:- From _____ To _____ No. of Days _____

(Both days inclusive)

Address during leave Period _____

Date: _____

Students Signature

Recommended / Not Recommended

Date _____

Supervisor's Signature _____

Following Leave are due to above student

Casual _____ Vacation _____ Medical _____

Date _____

Leave Sanctioned/Not Sanctioned

ME Office _____

Date _____

DPGC Convener _____

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