



T.K.M. COLLEGE OF ENGINEERING DUTY LEAVE APPLICATION FORM

[Please ensure that all sections of the form are completed accurately to facilitate prompt processing of your leave application.]

1. Name of Applicant: _____
2. Designation: _____
3. Department: _____
4. PEN : _____
5. Date(s) of Leave Applied For: _____
6. Number of Days: _____
7. Whether prior permission has been sought for this leave? YES/NO
8. Purpose for Leave: _____

[If in connection with the conduct of examinations, Name of examination/ Centre and station etc. are to be furnished.]

9. Name of authority who has requested the service and date of communication. } _____
 } _____

10. Alternative Arrangements made for Classes/Labs during leave:

- Course: _____ Date: __/__/__ Handled by: _____
- Course: _____ Date: __/__/__ Handled by: _____
- Course: _____ Date: __/__/__ Handled by: _____

For Elective/Minor/Honors courses, provide the details of make-up classes taken:

- Course: _____ Make-up Date: __/__/__
- Course: _____ Make-up Date: __/__/__

[Additional sheets may be attached, if required]

11. Applicant's Signature: _____ Date: _____

12. Approvals

Authority	Recommendations/Remarks/Orders	Signature & Date
Head of the Department	<i>Recommended / Not Recommended</i>	
Establishment section		
Principal		