



भारतीय प्रौद्योगिकी संस्थान गुवाहाटी
INDIAN INSTITUTE OF TECHNOLOGY GUWAHATI

सहभागिता तथा विशेष पहल कार्यालय
OFFICE OF THE INDUSTRIAL INTERACTIONS AND SPECIAL INITIATIVES

Form No. S8

APPLICATION FOR LEAVE OF PROJECT STAFF

1. Name **Dr./ Mr./ Ms./**

2. Designation & Project No :

3. Nature & Period of Leave	Nature	From	To	No. of Days
	Earned Leave			

4. Holidays, if any proposed to be Prefixed/ suffixed	Prefix	From:	To:	No of Days:
	Suffix	From:	To:	No of Days:

5. Reasons for leave :

6. Whether Station Leave Permission required or not Yes, From: To: No

7. Address on Leave :

Contact Phone No: (if any) Pin:

Date:

.....

Signature of the Applicant

Remarks/ Recommendation of PI

Signature

FOR USE BY II&SI OFFICE

Nature and period of leave applied	Nature	From	To	No. of Days
	Earned Leave			
Holidays Prefixing / Sufficing	Prefix			
	Suffix			
Station Leave	From :	To :	No. of Days :	
Balance of Leave as on date		Days		
No. of Special Earned Leave already availed during the year		Days		

Put up for approval	
	Dealing Asst. HoS (II&SI)
Approved/ Not Approved With/ Without Station Leave Permission	
.....	
Signature (Assoc. Dean II&SI)	