(Supervisor's Signature)

Approved/Not approved/Recommended

(Signature of ADOAA(PG)/DOAA)

Approved/Not approved

INDIAN INSTITUTE OF TECHNOLOGY GUWAHATI

ACADEMIC AFFAIRS SECTION

LEAVE APPLICATION FORM

(for M.Tech/MDes/MS(R)/PhD./Dual Degree programs)

1.	Name(IN BLOCK LETTERS)								
2.	Department/Centre/School								
3.	Roll No.								
4.	Nature & Period of Leave (Academic/ Personal/ Medical/ Unauthorized)		Nature		From	То	No. o	f days	
5.	Holidays, Prefixing/ Suffixing	Prefix	From:	To:		No.	No. of days:		
		Suffix	From:		То:	No.	No. of days:		
6.	Reason for Leave								
7.	Whether Station Leave perm	ission required or not		Yes, From:		To:		NO	
8.	Address while on leave								
		Phone:		E-mail:					

(Signature of the student)

Recommended/Not Recommended

(Signature of TA Faculty)

FOR OFFICE USE

١.	Leave available before this application	
ii.	Leave applied	
iii.	Balance after current sanction	
iv.	No. of days without scholarship	

(Signature of the Head of Department/Centre/School)

Date:

Date:



Date:

Recommended/Not Recommended