**INDIAN INSTITUTE OF PETROLEUM & ENERGY**



 **VISAKHAPATNAM**

 **APPLICATION FORM FOR GRANT OF LEAVE (INSTITUTE SCHOLARS)**

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| ***To be filled by the applicant*** |
| 1 | Name: |  | 2 | Roll No.: |  |
| 3 | Supervisor: |  | 4 | Dept: |  |
| 5. | Type of Leave |  Casual Leave |  Medical Leave | Duty Leave |
| 6. | Total No. of working days during the leave period | **Days** | **From** | **To**  |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_ FN/AN | \_\_\_\_\_\_\_\_\_\_\_\_ FN/AN |
| 7. | Leave Availedtill date | \_\_\_\_\_\_\_\_\_\_ Casual Leave  | \_\_\_\_\_\_\_\_\_\_ Medical Leave |
| 8. | Purpose |  |
| 9. | Address during Leave | Mobile No.  |
| 10. | Undertaking | I undertake to abide by the rules & regulations applicable in this regardSignature of the Research Scholar |
| 11. | Recommendation of Supervisor  | Recommended/ Not Recommended for \_\_\_\_\_\_\_\_ days (working days) for CL/ Medical Leave/ Duty Leave.Date: Signature of the Supervisor  |
| ***To be filled by the Head of Dept*** |
| Leave Availed till date | Casual Leave |  | Med. Leave |  | Duty Leave |  |
| Sanctioned / Not sanctioned \_\_\_\_\_\_ days (working days) of CL/ Medical/ Duty leave.Date: Signature of the Head of Dept. |
| ***Application Form is to be retained with HoD after sanction*** |
| **Joining Report****(To be filled on the date of joining)** |
| Date of Joining |  | Actual No. of days of leave availed |  |
| Signature of Research Scholar |  | Signature of HoD |  |
| \* A Research Scholar shall be entitled to (i) **Casual Leave of 15 days** and (ii) **Medical Leave of 15 days in a year** counting from the date of joining the program. Application for Medical Leave should be supported by relevant documents. Any absence over and above the admissible leave as prescribed above shall be without assistantship, which shall be deducted on a pro-rata basis for the days of such absence.  |