

Date: _____

DAV INSTITUTE OF MANAGEMENT
NH-3, NIT FARIDABAD

NATURE OF LEAVE: _____

1. Name : _____

2. Contact no. : _____

3. No. of days leave : _____

4. From _____ To _____

5. Reason for leave : _____

6. Arrangement for duty in your absence : _____

7. Have you handed over charge of important documents and cash etc. for
the period of absence :

8. Recommendations of the Concerned Program Director / H.O.D :

Dr. Neelam Gulati
Principal (Off.)

Signature of the applicant