

## भारतीय प्रौद्योगिकी संस्थान भुवनेश्वर INDIAN INSTITUTE OF TECHNOLOGY BHUBANESWAR

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

	To be Standard of ELAVE (INSTITUTE SCHOLARS)															
To be filled by the Applicant																
1	Name							2	Ro	oll No.						
3	Supervisor							4	So	chool	ol					
5	Type of Le	eave	☐ Casual Leave						Medical Leave				☐ Duty Leave			
6	Total No. of work days during the le period	ring the leave		OM AN						FN A						
7	Leave Availed Till Date		Casual Leave		-	_out of 15*			Medical Leave			out of 15*				
8	Purpose															
9	Address during	Ph:														
	Undertaking	I undertake to abide by the rules and regulations applicable in this regard.  Signature of the Research Scholar														
А	Recommendat Supervisor	Recommended/Not Recommended for days(working days) of CL/Medical Leave/Duty Leave  Signature of the Supervisor														
To be filled by the Head of School																
Lea	ve Availed Till Da	CL				Med. L				Duty L.						
Sanctioned/Not Sanctioneddays (working days) of CL/Medical Leave/Duty Leave  Signature of Head of School																
Application Form is to be retained with HOS after sanction																
						ining										
			[	To be fi	led	on the					21/0					
Date of Joining				Actual No. of days of leave availed												
Signature of Research Scholar							Signature of Head of School									
*A	scholar shall be e	ntitled to (	i) casual	leave of	15	days a	nd (ii)	med	ical le	eave of 1	.5 days	in a	year c	oun	ting from	

<sup>\*</sup>A 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.