भारतीय प्रौद्योगिकी संस्थान भुवनेश्वर
Indian Institute of Technology Bhubaneswar

Application for Permission to Pursue Higher Study

PART II

1.	Name, Designation & Employee Code (E.C)			
2.	Date of Joining IIT Bhubaneswar			
3.	Whether in probation			Yes ☐ / No ☐
4.	Highest Educational Qualifications and Professional/ Technical Qualifications possessed.			
	Whether permission was taken in the past to pursue higher study?			Yes ☐ / No ☐
	If Yes, please specify on following details:			
	SI	Name of Course	Institute	Exam Result
	a)			
	b)			
5.	Details of Higher Qualification (which the employee intends to pursue) along with name(s) of Institute / University etc. with complete address (**please attach details**)			
6.	a) Mode of Study Regular (Full time)/ (Part time)/Week end/Online etc.			
	b) In case of Regular (Full time), please specify how to attend the regular classes while working in IIT BBS.			
7.	Duration of Course (Years / Months)			
8.	Tentative Course starting date			
9.	How acquiring the higher qualification is likely to benefit the employee as well as the organisation			
	How the acquired higher qualification will benefit you in discharging your assigned responsibility efficiently?			How the Institute will benefit from you by permitting you undergo the higher qualification?

Declaration:

(a) I will pursue the course at my own cost, risk, and responsibility without jeopardizing Institute's work.

(b) There won't be any financial implication on part of the Institute.

(c) All work connected with my official duties will be performed by me without any hitch and I shall be liable for disciplinary action in case my work is not up to the mark or falls into arrears.

(d) I shall not be granted any leave for this purpose except examinations, for which I will avail from my regular Leave, subject to exigencies of Institute requirement.

(e) The permission granted to me is liable to be cancelled or withdrawn at any time without assigning any reason or giving any notice as per requirement of the Institute.

(f) I am aware that if as a result of grant of permission, I acquire higher qualification, this does not automatically render me eligible for promotion / upgradation.

Signature of employee with date

HoD's Recommendation:

Date: **Signature**

PART II

Establishment Section

May not be considered in view of _____

Forwarded for consideration by the Competent Authority.

Dealing Assistant / Superintendent (Estt.)

Asst. / Dy. Registrar (Estt.)

Recommended / Not Recommended

Date: **Registrar**

Approved / Not Approved

Director

Date:

Forwarded to Establishment Section for further necessary action.

Approval process flow:

Applicant ⟹ HoD ⟹ Establishment Section ⟹ Registrar ⟹ Director ⟹ Establishment Section