

**INSTITUTE OF HOME ECONOMICS**  
(University of Delhi)

**LEAVE APPLICATION FORM**

To be used for all types of leave

NAME : \_\_\_\_\_

DESIGNATION: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

TYPE OF LEAVE	FROM	TO	TOTAL NO. OF DAYS	REMARKS
(a) Casual Leave				
(b) Earned Leave				
(c) Medical Leave				

Total Absence Required \_\_\_\_\_ Day(s) from \_\_\_\_\_ to \_\_\_\_\_

Purpose of Leave \_\_\_\_\_

Whether Leaving Station? (Yes / No) \_\_\_\_\_

Address while on Leave \_\_\_\_\_

Emergency Contact Number during leave \_\_\_\_\_

Date: \_\_\_\_\_

(Signature of Applicant)

**REMARKS OF DEPARTMENT IN-CHARGE**

1. Leave as requested above is recommended
2. Leave as requested above is not recommended on account of \_\_\_\_\_

Signature / Designation / Date

**FOR USE IN ADMINISTRATION DEPARTMENT**

Leave in Credit \_\_\_\_\_ Days; Leave Applied for \_\_\_\_\_ Days; Balance Leave as on Date \_\_\_\_\_ Days

Signature of S.O (Admn.)/ Dealing Asst.

**REMARKS OF SANCTIONING AUTHORITY**

1. Leave Sanctioned.
2. Leave not sanctioned on account of reason stated above.

Signature of Director, IHE