

Date:				

Recommended by (Dean/HOD)

## **DAV INSTITUTE OF MANAGEMENT** NH-3, NIT FARIDABAD

## **SHORT LEAVE**

1. Dated:	
2. Name :	Designation :
3. Department :	
4. Short Leave time From :	to
	(Signature of the applicant)
	Recommended by (Dean/HOD)
Approved By (Principal Direct	tor/ Vice Principal)
ote:-	
> Prior information must be given to I > Station Leave must be mentioned in	f it is to be availed  Date:
> Prior information must be given to I > Station Leave must be mentioned in	Date:  DAV INSTITUTE OF MANAGEMENT  NH-3, NIT FARIDABAD
> Prior information must be given to I > Station Leave must be mentioned in	Tate:  DAV INSTITUTE OF MANAGEMENT
> Prior information must be given to I > Station Leave must be mentioned in	Date:  DAV INSTITUTE OF MANAGEMENT NH-3, NIT FARIDABAD
ote:- > Prior information must be given to I > Station Leave must be mentioned in  विद्या अमृतम् अञ्चते  DAY INSTITUTE OF MANAGEMENT FARIDABAD	Date:  DAV INSTITUTE OF MANAGEMENT  NH-3, NIT FARIDABAD
Prior information must be given to I  Station Leave must be mentioned in  E  Prior information must be given to I  Station Leave must be mentioned in  Davinstrute of management for mana	Date:  Date:  DAV INSTITUTE OF MANAGEMENT NH-3, NIT FARIDABAD  SHORT LEAVE

## Approved By (Principal Director/ Vice Principal)

## Note:-

- Prior information must be given to Incharge Time Table Committee
   Station Leave must be mentioned if it is to be availed