LEAVE APPLICATON FORM (HOSTEL)
(Please tick wherever applicable)

Name of student   : _____

Room No.   : _____

Course of study   : MBA(SS)/ (TT)/ (IB/ MBA(Tourism)/BBA(T)

Leave required   : From _____ to _____

Date & time of leaving   : Date_____ Time _____

Name of train (if going by train)   : _____

Date & time of returning to hostel   : Date_____ Time _____

Reason for going on leave   : _____

_____

Name, address & telephone no. of the contact person at the place going to:

Name_____

Address_____

Tel no._____ Personal Mobile no. _____

Declaration

1. I shall be personally responsible for my well being while on leave from hostel/ institute.
2. The Institute will not be responsible while I am outside the campus.
3. This leave for personal reason shall not be taken as permission for counting lectures regarding attendance for any subject/ course.

Signature of student:

Forwarded /not forwarded

Signature of Asst. Care Taker

Hostel Warden