SWAMI VIPULANANDA INSTTITUTE OF AESTHETIC STUDIES EASTERN UNIVERSITY, SRI LANKA APPLICATION FOR LEAVE

01. Name :		01. Name :		
02. Designation :		02. Designation :		
03. Department :	<u></u>	03. Department :		
04. No. of days leave applied 05. Leave taken in current year	Casu. Vaca. Duty Others :	O4. No. of days leave applied : O5. Leave taken in current year :		
06. Date of First Appointment	: Date Month Year	06. Date of First Appointment :		
07. Date of Commencing Leave	:	07. Date of Commencing Leave :		
08. Date of Resuming Duties	:	08. Date of Resuming Duties :		
09. Reason for Leave10. Address when on leave11. Signature of Applicant12. I agree to act for the applicant	:	09. Reason for Leave:		
13. Leave Allowed / Not Allowed14. Leave Allowed / Not Allowed	Signature of Officer Acting :	Signature of Off 13. Leave Allowed / Not Allowed :		
15. Noted and Returned16. Noted in Leave Register	: Deputy Registrar/Director : Applicant	Head of Degrate. 14. Noted and Returned :		
Folio No. :	Leave Clerk	15. Noted in Leave Register :		

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01	Name :						
02	2. Designation :						
03	Department :						
		Casu.	Vaca.	Duty	Others		
04	No. of days leave applied :						
05	5. Leave taken in current year :						
			<u> </u>				
06	5. Date of First Appointment :	Date	M (onth	Year		
07	Data of Commonaina Lagra						
07	7. Date of Commencing Leave :						
80	3. Date of Resuming Duties :						
09	. Reason for Leave :						
10	Address when on leave :						
11	Signature of Applicant :						
12	I agree to act for the applicant :						
	Signa	ature of C	Officer Ac	cting			
13	3. Leave Allowed / Not Allowed :						
	·				••••		
	F	Head of D	epartme	nt			
14	Noted and Returned :			• • • • • • • • • • • • • • • • • • • •			
		Appl	icant				
15	5. Noted in Leave Register : .						
	Folio No. :		Leave 0	Clerk			