



राष्ट्रीय प्रौद्योगिकी संस्थान मिजोरम
NATIONAL INSTITUTE OF TECHNOLOGY MIZORAM
(An Institution of National Importance under the Ministry of HRD, Govt. of India)
CHALTLANG, AIZAWL, MIZORAM - 796012

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APPLICATION FOR LEAVE OF CASUAL/CONTRACT EMPLOYEE

1. Name of applicant : _____
2. Designation/Post held : _____
3. Department / Section : _____
4. Nature of Leave : _____
5. Period applied for : _____ Day(s)
6. Date : From. _____ to _____
7. Sundays and holidays : _____
if any proposed to be prefixed/
suffixed to leave
8. Grounds on which leave is applied for : _____
9. Alternate arrangement of Academic : _____
and Admin. responsibilities
10. Address during leave period : _____

Signature of Applicant
(With date)

11. Remarks and/ or recommendation of
the controlling officer

Signature of Controlling Officer
(With date)

CERTIFICATE REGARDING ADMISSIBILITY OF LEAVE

12. Certified that..... (Nature of leave) for.....(Period)
from.....to.....as admissible under Rule.....of the
Central Civil Services (Leave) Rules, 1972.

Signature of the Controlling Officer
(With date)

13. Orders of the authority competent to grant leave.

Registrar / Director