



Shree Chanakya Education Society's
INDIRA COLLEGE OF ENGINEERING & MANAGEMENT
Parandwadi, Pune 410506

APPLICATION FOR EL / SL/ LWP / MATERNITY LEAVE

Name: Designation Dept.:

Leave Address

No of Days :- From :- To:-

Prefix being Suffix being

Ground for leave

Date of application :- Signature of Applicant :-

Leave asked for is recommended / not recommended for sanction.

Sign of H.O.D.

Leave asked for is / not sanctioned.

Leave asked for is / not sanctioned.

Balance of Earned Leave ___ days / Sick Leave ___ Days.

(Registrar)

(Director)



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