

DEPARTMENT OF ELECTRICAL ENGINEERING
IIT KANPUR

APPLICATION FOR COMPENSATORY LEAVE

Date: _____

Name: _____

Designation: _____ PF No.: _____

From: _____ to _____ No. of Days: _____

In lieu of: _____ No. of Days: _____

Reason for Leave: _____

Address while on Leave: _____

Contact No. while on Leave: _____

Signature of Applicant

Forwarded by Faculty Coordinator

Approved/Not Approved

Head (EE)