भारतीय सूचना प्रौद्योगिकी संस्थान, लखनऊ

INDIAN INSTITUTE OF INFORMATION TECHNOLOGY, LUCKNOW

An Institute of National Importance by Act of Parliament

(APPLICATION FOR LEAVE BY THE STUDENTS IN (20%) PART OF ATTENDANCE IN EACH SUBJECT)

1.	Name of Suduent	Enrollment No	
2.	Hostel Address		
3.	Parents Mobile No	Parents Email id	
4.	Full Contact Address during leave per	eriod in case the visit is for a place other than Home Town	
5. 6.		if any suffixed or prefixed to the above	
7.		ifies one out of - Totally personal/Any Interview/Medical/Any ence Paper/Any other etc.)	
8.		s attached for proposed period of leave in case of personal leave on concerned authority are enclosed (Y/N) ?	
the	aration: I, (Name with Enroll Noinformation in this application are true ons by the Institute.	e. In case any of these is found False/Misleading I shall be liable to	hereby declare that all o due disciplinary
	Parent/Guardians wherein His/ II. For Medical leave, the applicat	eave application will be entertained without accompanying requence /her parent has fully supported the reason for leave along with the tion should accompany the copy of the medical prescription slip IBBS Doctor from whose advice the treatment has been administ	the period of leave. & original medical
(Students Signature)		
Mob	ile No	_	
	:		ve Approved HOD (IT)
riac	e:		