

**DEPARTMENT OF APPLIED MATHEMATICS AND SCIENTIFIC COMPUTING
INDIAN INSTITUTE OF TECHNOLOGY ROORKEE
SAHARANPUR CAMPUS, SAHARANPUR-247001, (U.P.)**

LEAVE FORM

Name of Student	:	_____
Enrollment Number	:	_____
Course	:	_____
Leave Start Date	:	_____
Leave End Date	:	_____
Number of Days	:	_____
Purpose of Leave	:	_____
Address During Leave	:	_____

Contact No.	:	_____
Type of Leave	:	Casual Leave <input type="checkbox"/>
		Office/Duty Leave <input type="checkbox"/>
		Station Leave <input type="checkbox"/>
		Medical Leave <input type="checkbox"/>
		Vacation Leave <input type="checkbox"/>

Signature of Student

Supervisor/Chairperson DAPC*

Head of Department

NOTE:

- 1- Student will submit the application in Academics Office, Saharanpur Campus, after approval of Supervisor/Chairperson DAPC/Head of department.
- 2- *When Supervisor has not been allotted for an M.Tech Student, the student has to take the approval of the Chairperson-DAPC. Supervisor's approval is mandatory for Ph.D. Students.