The Principal,

Shri Yogeshwari Polytechnic, Ambajogai, Dist. Beed.

Sub: Application for Casual / Duty / Sick Leave.

Your are kindly requested to grant me leave for	Sir,	
1) Casual Leave for Personal work. 2) Duty Leave for Meeting / Official work at	Your are kindly requested to grant me le	eave for day (s)
2) Duty Leave for Meeting / Official work at	from dt to dt f	for the reason given below.
3) Earn Leave 4) Sick Leave due to ill health. Thank You. I have informed Head of the Department about adjustments of my lectures / practicals. during my leave period as detailed below. Yours faithfully (Signature) Forwarded for saction Leave balance to his / her Credit. Name:	1) Casual Leave for Personal work.	
4) Sick Leave due to ill health. Thank You. I have informed Head of the Department about adjustments of my lectures / practicals. during my leave period as detailed below. Yours faithfully (Signature) Forwarded for saction Leave balance to his / her Credit. Name:	2) Duty Leave for Meeting / Official work a	at for
Thank You. I have informed Head of the Department about adjustments of my lectures / practicals. during my leave period as detailed below. Yours faithfully (Signature) Forwarded for saction Leave balance to his / her Credit. Name:	3) Earn Leave	
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during my leave period as detailed below. Yours faithfully (Signature) Forwarded for saction Leave balance to his / her Credit. Name:	I have informed Head of the Department a	bout adjustments of my lectures / practicals.
Forwarded for saction Leave balance to his / her Credit. Name:	하나 보호 회사 하는 사람들은 사람들이 되었다면 하는 사람들이 되었다.	
Forwarded for saction Leave balance to his / her Credit. Name:		fours faithfully
Forwarded for saction Leave balance to his / her Credit. Name:		
Leave balance to his / her Credit. Name :		(Signature)
Leave balance to his / her Credit. Name :		
	집 이 발생님이 가게 되었다면서 하는 하는 아이를 하고 있다면서 하는 것이 되었다면 하는 것이 없었다.	Name
Head of the Dept.	Leave balance to his / her Credit.	Name:
		Head of the Dept.
Office Suptdt. Leave sactioned.	Office Suptdt	Leave sactioned.
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