

Sri Krishna Dutt Academy,
Vrindavan, Lucknow

Name of Applicant Department

Leave From To..... Reason of Leave

Class Arrangement by:

1-Mr. /Mrs. Signature

2-Mr. /Mrs. Signature

3-Mr. /Mrs. Signature

Address during Leave Phone No.

Date

Signature of Applicant.....

Office Use only

Date -.....

Approved /Not Approved.....

Signature
