

DEPARTMENT OF CIVIL ENGINEERING

SARDAR VALLABHBHAI NATIONAL INSTITUTE OF TECHNOLOGY, SURAT

A

Ph. No. DCE: 2201841 / 2201842 Inst. (O): 2223371 to 2223374 FAX No. 2227334, 2228394 Email: hod@ced.svnit.ac.in

Leave Application for M.Tech.

						Date:						
1.	Student Na	ame:										
2.	Roll No.:											
3.	Bio-metric ID No**.:											
4.	Type of Leave Requested: Casual / Duty*											
5.	Specialization: (✓ whichever is applicable)											
	CTM	EE	GE	SE	TEP	UP	WRE					
6.	Leave Details:											
7.	Leave Period: On/From to											
8.	Total number of days Requested:											
9.	Alternate Arrangement: (As per page no. 2)											
Stude	ent Signatur	re										
Through Supervisor												
	PG In-Charge											
Office Record												
	Verifie	d / Not Veri	fied									

Head of Department

^{*}In case of Duty Leave, please attach reference documents.

^{**}All fields are Mandatory



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Alternative arrangement of classes

Name of research	n scholar:								
Duration (dates):	ration (dates): From to								
Purpose (reason)	of leave:								
Date & Day	Class (B.Tech/M.Tech)	Subject (L/T/P)	Period	Research Scholar / TA to Whom Class is assigned					
,				Name	Signature				
Date:									
Signature:									