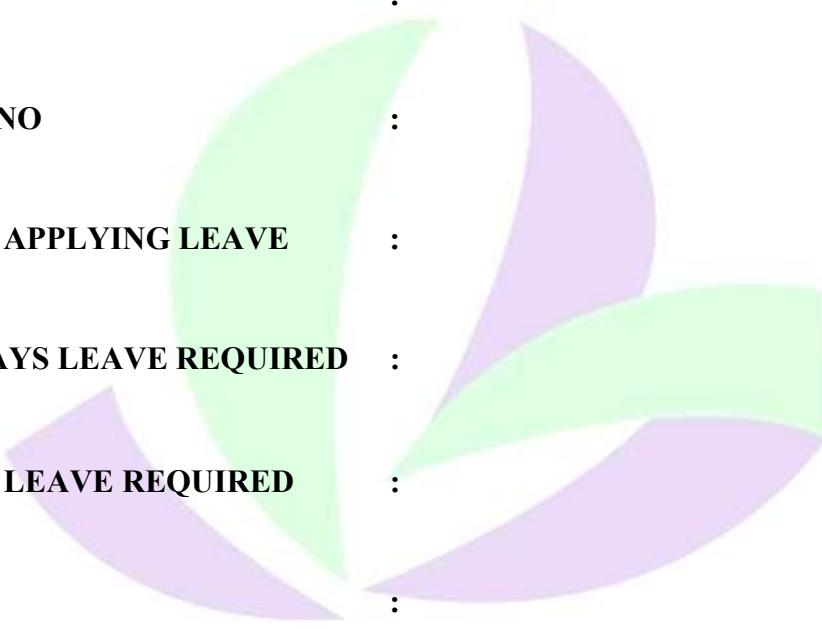
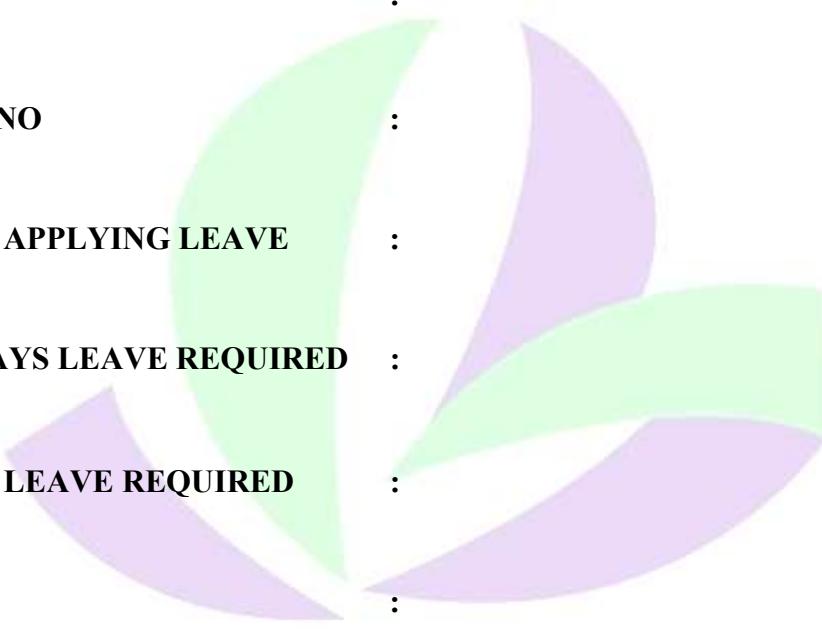
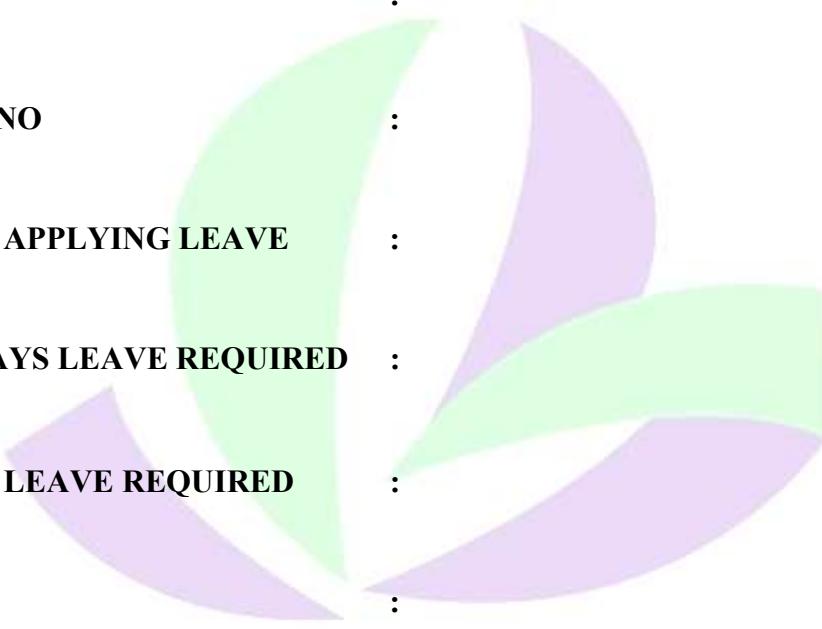
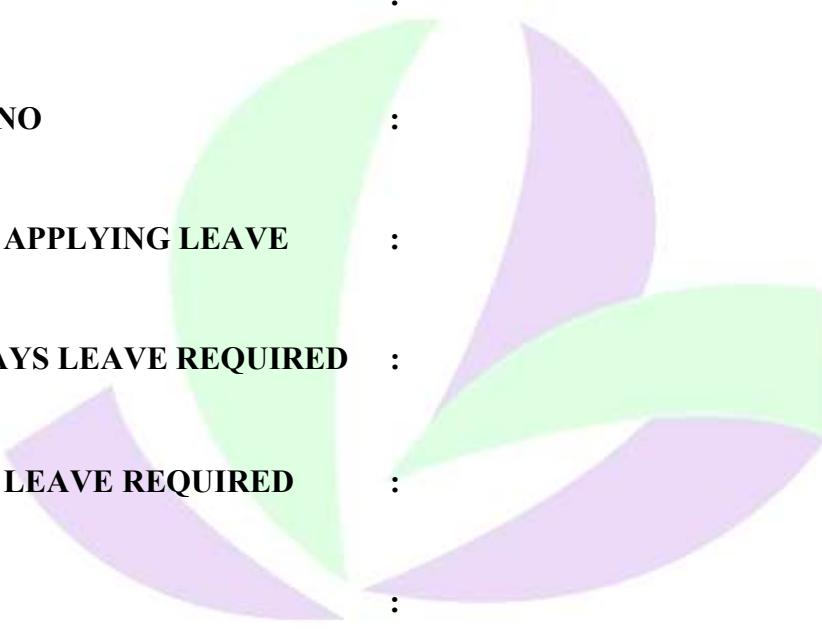


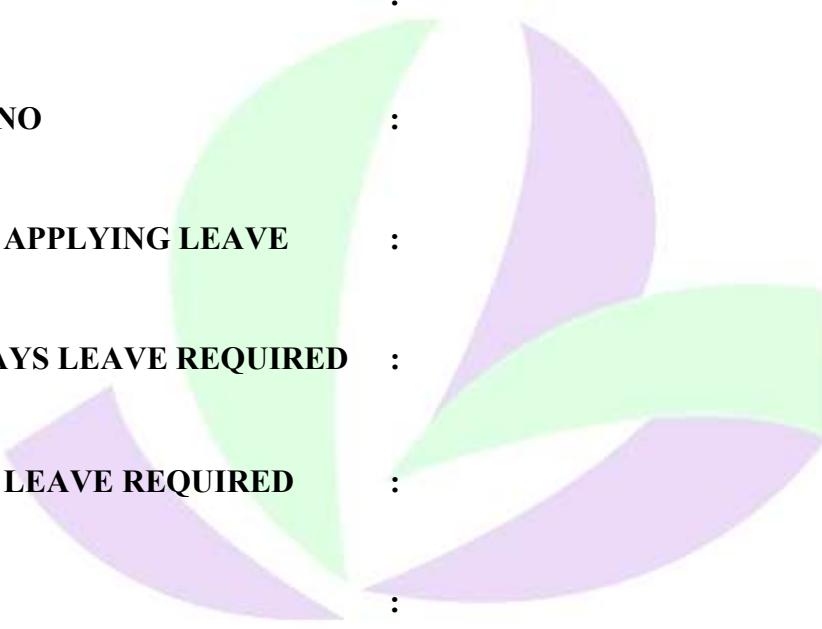
## STUDENT LEAVE APPLICATION FORM

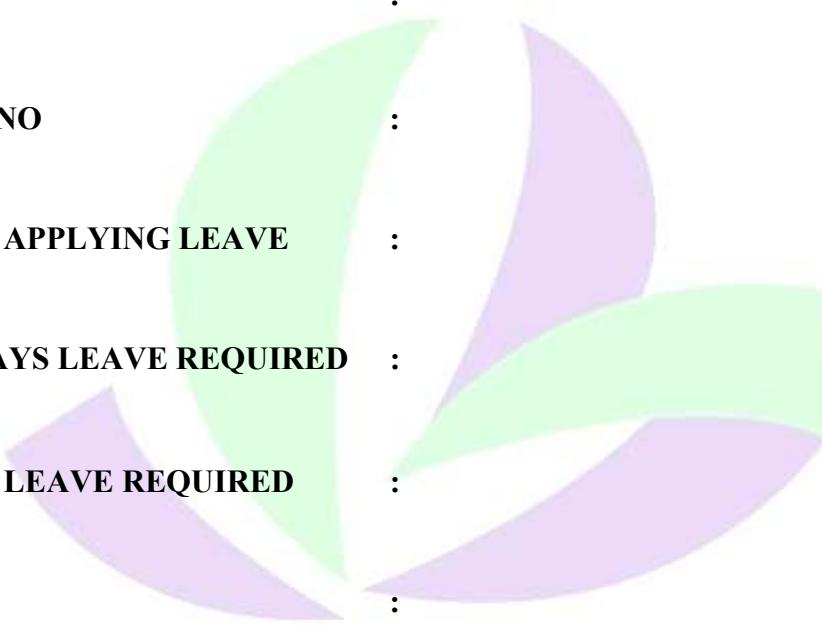
1. NAME OF THE STUDENT : 

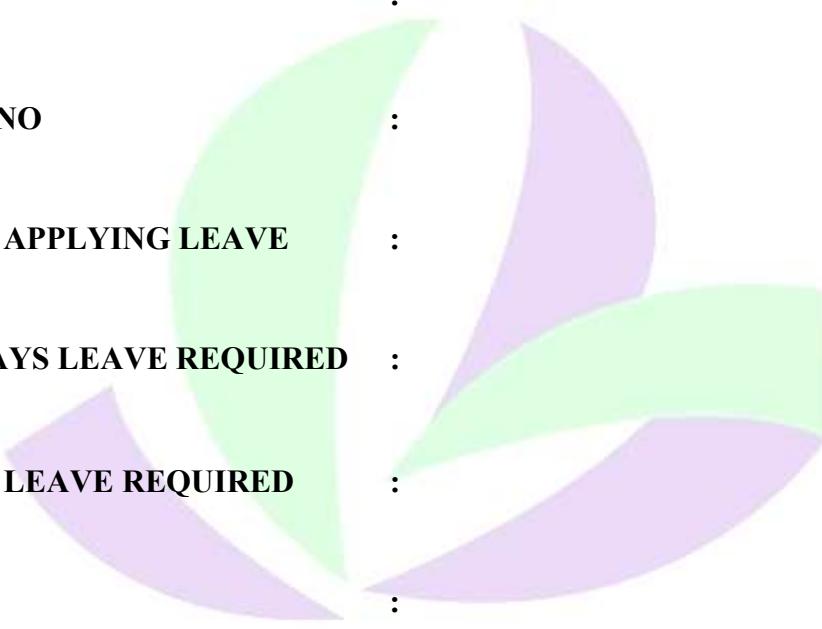
2. ROLL NO : 

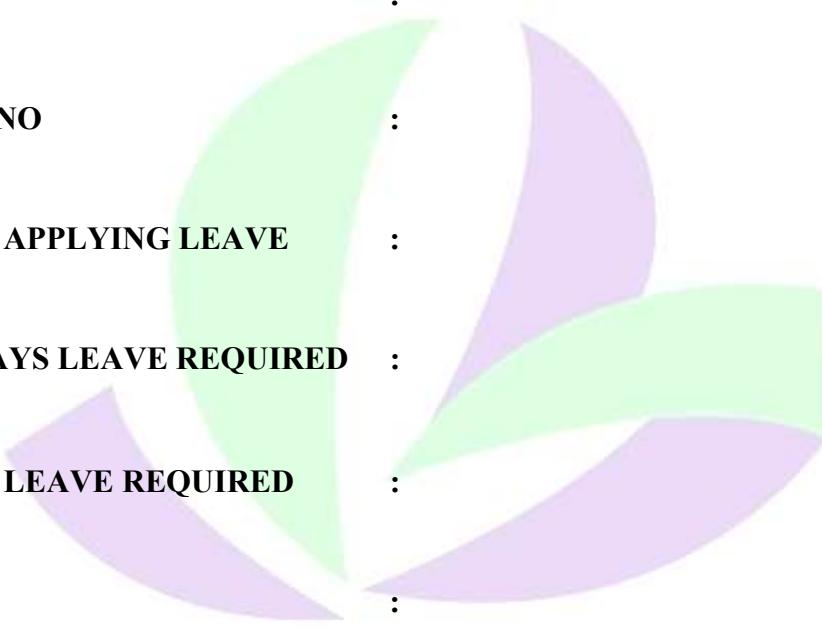
3. CLASS : 

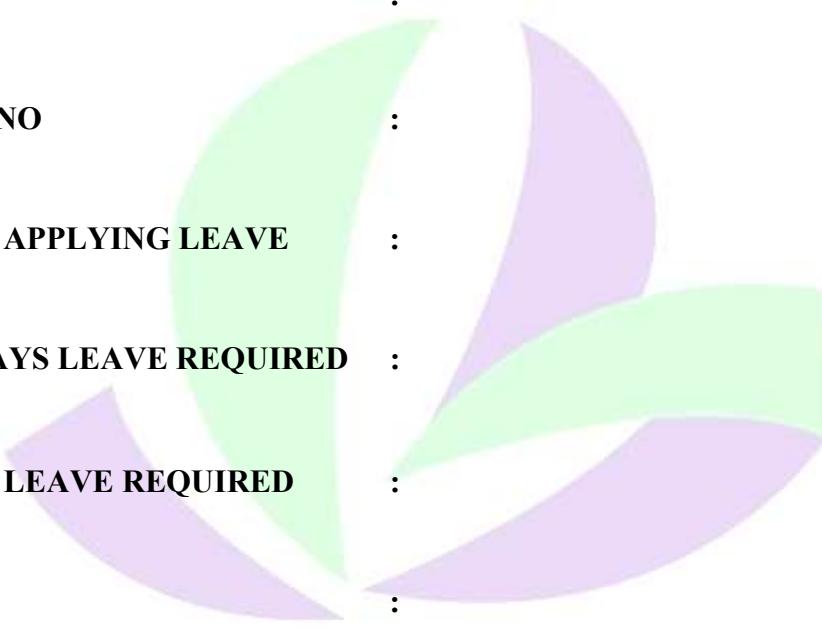
4. MOBILE NO : 

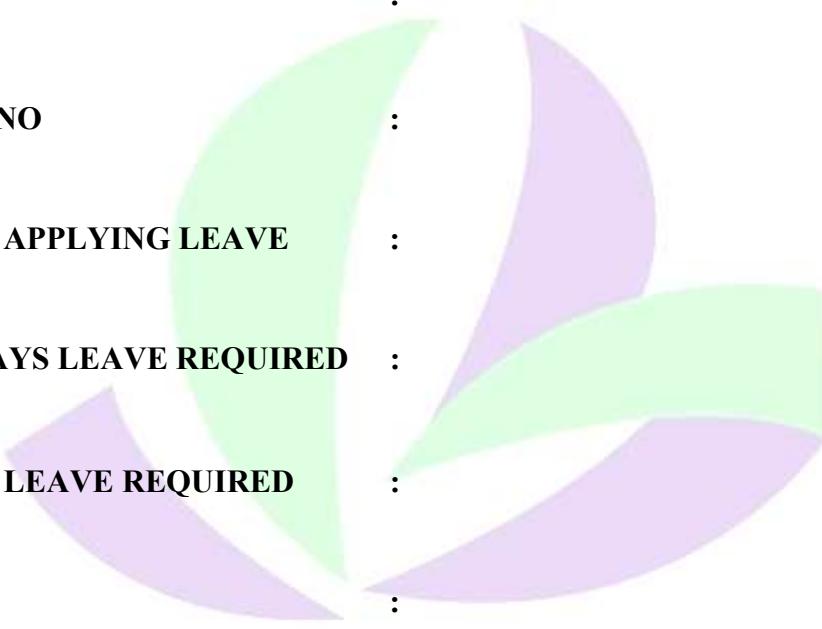
5. DATE OF APPLYING LEAVE : 

6. NO OF DAYS LEAVE REQUIRED : 

7. DATE OF LEAVE REQUIRED : 

8. REASON : 

9. PARENT'S SIGNATURE : 

10. STUDENT 'S SIGNATURE : 

---

OFFICE ONLY

CLASS-IN-CHARGE

HEAD OF THE DEPARTMENT