



DEPARTMENT OF \_\_\_\_\_  
**NATIONAL INSTITUTE OF TECHNOLOGY**  
TIRUCHIRAPPALLI - 620 015, TAMIL NADU, INDIA

STUDENT LEAVE APPLICATION FORM

Name : \_\_\_\_\_  
Roll Number : \_\_\_\_\_  
Programme : M.Tech. / M.Arch. / M.Sc. / MCA / MBA / MA  
Specialization : \_\_\_\_\_  
Period of Leave : From : \_\_\_\_\_ To : \_\_\_\_\_ No. of days: \_\_\_\_\_  
Purpose : \_\_\_\_\_  
Date of application : \_\_\_\_\_

Recommended / Not Recommended

Signature of the Student

Signature of the Coordinator / Guide

Leave on credit : \_\_\_\_\_  
Leave applied : \_\_\_\_\_  
Balance of leave : \_\_\_\_\_

Superintendent

Head of the Department



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