



Bharat Academy & Sciences

Staff Leave Application Form
Bharat Academy & Sciences
Howrah, Uluberia

Staff Details:

- **Full Name:** _____
 - **Designation:** _____
 - **Department:** _____
 - **Contact Number:** _____
-

Leave Details:

- **Type of Leave:**
 - o Casual Leave
 - o Medical leave (***Must be accompanied with an medical certificate from a registered medical practitioner. ***)
 - o Other (Please specify): _____
 - **Leave Duration:**
From: _____ To: _____
(Total days: _____)
 - **Reason for Leave:**
-

Duty Handover Details:

- **Person to Take Over Duties:** _____
 - **Details of Handover:**
-

Declaration:

I request to be granted leave for the mentioned period and confirm that I have handed over my duties as per the guidelines. Upon my return, I will take back the responsibilities.

Staff Member's Signature: _____

Date: _____

For Office Use Only:

School Seal:

- **Leave Approved/Rejected:** _____
- **Authorized Signatory:**

