



Regular Non-Teaching

राष्ट्रीय प्रौद्योगिकी संस्थान आंध्रप्रदेश
NATIONAL INSTITUTE OF TECHNOLOGY ANDHRA PRADESH
Near National Highway No. 16, Kondrupolu, Tadepalligudem – 534101
West Godavari District, Andhra Pradesh, India

APPLICATION FOR MATERNITY/PATERNITY LEAVE

Name of the applicant & EC No.			
Designation/Department			
Nature of Leave applied for (ML/PL)			
Period of Leave (including any Holidays)	From:	To:	No.of days:
Leave (if extended)	From:	To:	No.of days:
Alternative arrangement details			
Address during the leave			
	Pincode:	Contact No:	
Medical Certificate enclosed (Yes/No)			

Signature of the applicant with date

For use by the Administration Section

Certified that _____ (nature of leave) for _____ period, From _____
To _____ is available as per following details.

Nature of leave applied for	No.of surviving children's	Medical Certificate enclosed (Yes/No)

Dealing of the Department (Admin/Estt)

Remarks of the Head: Recommended/Not recommended

Signature of the HOD

Sanctioned/Not Sanctioned

Signature of the Registrar

For use by the Administration Section

i) Joining Report received on _____ ii) Leave entered in the Service Book/Leave
Register at page no. _____ iii) Fitness Certificate Attached (Yes/No) _____

Verifying Officer