



LEAVE APPLICATION FORM

Annexure E should have attached evidence document(s) in case of prolonged absence (three days and more)

Date : _____

Dear Ma'am,

You are requested to kindly grant leave to my ward _____ studying in _____ (Class & Section) at your school from _____ to _____ for _____ days. (Total Number of days)

Purpose / Reason for Leave:

Declaration by the Parent

- I have read and clearly understood all instructions with respect to Attendance and Regularity, as specified on Page 6 in the School Almanac and I am aware of the consequences of absenteeism.
- I will extend my wholehearted support to the school, in helping my child to cope up with and complete all academic work.

Father's Name: _____

Mother's Name: _____

Father's Signature _____

Mother's Signature: _____

Father's Contact Details: _____

Mother's Contact Details: _____

FOR OFFICE USE

Leave Granted/ Not Granted

Class Teacher's Remarks: _____

Class Teacher's Signature: _____ CO's Signature: _____

Principal's Signature: _____