

Employee Copy



HOLY CROSS COLLEGE, AGARTALA

Staff Leave Application Form

Name of Employee: *Dr. Charnistha Raleshi*
Designation: *Asst. Prof.* Department: *Political Science*
Leave Date From *14/3/24* to *15/3/24*
Number of Leave Required: *02*
Type of Leave: CL / SPCL / DL / QL / MDL / HPL / COML / EXOL / SL / MTL / PL / EAR. L
Reason: *National Seminar*

Date: *11/3/24*

Signature: *Charnistha Raleshi*

Leave Granted with pay / without pay

Date: *11/3/24*

B. M. S.

Principal

11/03/2024