HALL MANAGEMENT CENTRE IIT KHARAGPUR

"Leave Approval" for Boarders during Autumn/Spring Semester

Name of the Boarder		
Roll No.		
Department/Centre/School		
Hall Name and Room No.		
Contact Number		
Residential Address		
Guardian's Name and Contact Number		
Period of Leave (Must mention the Date, Month, and Year)	From:	То:
Purpose of leave		
Signature of the Boarder with date		
Signature of the Faculty Adviser/Supervisor with date		
Name of the Faculty Advisor/Supervisor		
Signature and seal of the Head of the Dept./Cent./School		
SUBMIT THE FORM TO THE CONCERNED WARDEN AND PRODUCE THE COPY AT THE SECURITY GATE FOR EXIT/ENTRY		