ACHARYA NARENDRA DEV COLLEGE

UNIVERSITY OF DELHI

(APPLICATION FORM FOR STUDY LEAVE)

Name of the College

- 1. Name of the applicant in full:
- 2. Present designation:
- 3. Date of Birth/Age
- 4. (a) Date of first appointment:
 - (b) Date of appointment from which he is in continuous service in the college:
 - (c) Date of confirmation:
 - (d) Date of promotion to the present post:
- 5. Educational Qualifications:
- 6. (a) Married/Unmarried:
 - (b) No. of dependents(State nature of relationship in each case)
- 7. Present Pay:
- 8. (a) Period for which leave is required:
 - (b) Approximate date of availing of the leave, if granted:
- 9. * State whether leave is required
 - (a) with pay and maintenance allowance
 - (b) with pay only
 - (c) with maintenance allowance only
 - (d) without pay and without maintenance allowance
- 10. University/Institution proposed to join
 - (a) State
 - (b) Country
- 11. (a) N.B. (Enclose copy of letter(s) relating to the offer of admission.

 Purpose for which study leave is required viz. whether for higher studies or research work.
 - (b) Subject or branch of study which is proposed to be studied.
- 12. (a) The nature and the amount of any Scholarship, fellowship, or other financial aid, including travel grant if any, obtained or promised. Give full details (enclose copy of the relevant document(s).

(It shall be the duty of the person granted study leave to communicate to the College immediately any financial aid actually offered and received by him during his leave from any person or institution whatsoever).

If the scholarship, Fellowship or financial assistance has been sought or obtained (b) direct from a foreign Mission/ Foundation/ Government/ Organisation, if may be sated as to whether the approval of the Government of India has been obtained for its acceptance. Whether study leave was granted previously if so, the conditions of grant and the period for the same with other details may be indicated. Whether willing to execute a bond for serving the College on return for a period as may be asked for by the College. Signature of the applicant Recommendation of the Head of the Department of the University Signature of the Head of the Department Recommendation of the Principal of the College Signature of the Principal of the College

13.

14.

Date:

Date

Date