

Department of Agricultural Economics and Social Sciences
Chittagong Veterinary and Animal Sciences University
Khulshi, Chittagong-4225

To

Head/Director
Faculty of Veterinary Medicine
Chittagong Veterinary and Animal Sciences University

Subject: Application for leave/permission to be absent in the workplace

1. Name:.....
2. Designation: Office Asst. Cum-Computer operator/Office Asst./ Lab. Attendant.
3. Leave from.....To.....
4. Total number of days:
5. Type of leave: Casual leave/Station leave/Recreational leave/Earned leave/Study leave/
Maternity leave/Duty leave/Sick leave/Others
6. Purpose of leave:.....
7. Station leave from.....To.....
8. Emergency contact number:.....
9. Replacement/Alternative arrangement in place: Yes/No
10. For international travel relevant office order is presented or not: Yes/No/NA

Signature and seal of the applicant