



# SCHOOL OF ART DESIGN & ARCHITECTURE - SADA

## STUDENT LEAVE APPLICATION FORM

- Registration No: \_\_\_\_\_ Name: \_\_\_\_\_
- Discipline: \_\_\_\_\_ Semester: \_\_\_\_\_
- Purpose of Leave : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Duration of Leave: From \_\_\_\_\_ To \_\_\_\_\_ No of Days: \_\_\_\_\_
- Leave Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Detail of Documents/Proof: \_\_\_\_\_

Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_

(Approved leave will not be considered while calculating attendance. Student is responsible to maintain 75% attendance in each subject / studio)

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(For Office Use Only)

Availed Leave: \_\_\_\_\_

HoD /Prog Coord Signature: \_\_\_\_\_

(Communicated to concerned faculty through personal liaison)

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Approved / Not Approved

DC Exams Signature: \_\_\_\_\_

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