



BHARATI VIDYAPEETH UNIVERSITY
COLLEGE OF ENGINEERING
PUNE-SATARA ROAD, PUNE – 411 043

COMPENSATORY LEAVE FORM

Application Date: / /

To,
The Principal,
BVU College of Engineering,
Pune-43

Applicant's Name _____ **Post** _____ **Department** _____

I have performed extra duty on the dates with the necessary details given below.

Sr. No	Day	Date	Nature of work
1.			
2.			
3.			

I hereby request you to kindly grant me Compensatory Leave on the dates mentioned below :

Day and Dates of Leave:

Day			
Date			

Details of Address and Contact during leave: _____

Workload Arrangement during leave:

Sr. No	Day	Date	Nature of work			Person Responsible during leave	Signature
			Class	Lect / Pract.	Time		
1.	Monday						
2.	Tuesday						
3.	Wednesday						
4.	Thursday						
5.	Friday						
6.	Saturday						
7.							
8.							
9.							

Name of the Applicant: _____

Signature: _____

Recommendation of Head of the Department

As per the above application, I am recommending the leave/s of _____
from _____ to _____ for _____ days. He / She has taken / not taken prior permission to
remain absent for the above mentioned period. The alternative workload arrangement has been checked
and verified.

Head of the Department
Signature and Seal

The above leave application for leave/s from _____ to _____ for _____ days has been
Sanctioned / Not Sanctioned.

Principal