INDUSTRIAL PRACTICE SCHOOL, K.L. UNIVERSITY LEAVE APPLICATION Name : ______ Program: B. Tech, Sem Branch: _____ Regional Office : _____ Location of Project: _____ Company : _____ PSP Title : _____ Company Guide : _____ University Guide: _____ Company Guide : _____ Period of Present Leave: From: _____ To: ____ No. of days: ____ Reason:

I am aware of the guidelines for leave and I understand the implications thereof. I request you to grant me leave as per the above details.

Date: Signature of Student

FOR OFFICE USE ONLY

Signature of Company Guide

Signature of University Guide Date:

Date: