

J D BIRLA INSTITUTE, DEPARTMENT OF SCIENCES / COMMERCE
MEDICAL LEAVE APPLICATION

Date:

To
The Principal
J D Birla Institute
Kolkata

Yours faithfully,

PARTICULARS

Name of Student					
Class		Section		Roll Number	
Leave Address					
Nature of Illness					
Period of Leave applied for	From		To		
Physician's Name		Registration Number		Contact Number	
Whether leave applied earlier	YES / NO	Number of days (mention the dates)		Nature of Illness	

Whether Submitted the Following Documents

LIST OF DOCUMENTS TO BE SUBMITTED (in the order)	Put a √ mark (BY STUDENT)	Put a √ mark (BY COLLEGE AUTHORITY)
1. Medical Treatment particulars		
a) Doctor's prescription/s		
b) Medical bills		
c) Other Repots		
d) Others (Specify)		
2. Medical Certificate		
3. Fitness Certificate		
Signature with date	Student	College Authority

RULES

- Extension of leave applied for must have to be communicated before exhaustion of leave applied for
- All valid and complete set of documents would have to be submitted
- Overwriting on the documents is not permitted
- Granting leave is the sole discretion with reasons of the management
- It is the duty of the student concerned to check from the office if her leave has been approved