



དཔལ་ལྷན་འབྲུག་གཞུང་།  
 བཟོ་རིག་སློབ་བཤམ་སློལ་ཁང་། བསམ་མ་ཐང་། དབང་འདུས་པོ་བྲང་།  
**Technical Training Institute, Samthang-Wangdue**  
*Excellence in Heavy & Specialized Machine Operation*

**LEAVE REQUEST AND APPROVAL**

Name of Applicant : \_\_\_\_\_

Kindly grant me leave as follows:

Sl.no	Type of leave	Select to avail (✓)	Duration			Remarks
			Start date	End Date	Total	
1	Casual Leave					
2	Earned Leave					
3	Maternity leave					Attach Evidence
4	Paternity leave					Attach Evidence
5	Extraordinary Leave					Execute
6	Bereavement Leave					Attach Evidence
7	Medical Leave					Attach Evidence
8	Medical escort Leave					Attach Evidence

Submit Reasons and Contact No:

.....

Date.....

Signature of Applicants

I hereby confirm that substitution arrangements with Mr./Ms.....shall be made for classes/workshop practical during his/her leave of absence from duty. I recommend leave as applied for subject to his/her leave in credit.

Sign. Head of Department

Sign. Training Head

Until today, the applicant has.....days of **casual leave** for financial year 2020-2021.

Sign. Administration

Leave **approved / Not approved**

Comment(s).....

Date:.....

Signature of Manager