ROYAL UNIVERSITY OF BHUTAN LEAVE APPLICATION FORM



Name of Staff				
Name of Supervisor				
Type of leave				
Effective dates	From:		-	То:
Number of days				
Note: Leave other than casual and earned must be supported by documents				
Reasons for leave				
Date of application				
Applicant's signature				
During the applicant's leave of absence, responsibilities will be looked after by			Name of staff:	
			Signature	
Status of leave application Ap			proved	
Leave approved by				Signature
				Date:
Records Section (HRD/ADM)				
Certified that the staff h	ıas	day(s)		leave balance as on
Records section authority				
Sig			nature	