The principal,				
Govt. Graduate Co	ollege,			
Civil Lines, Sheikl	hupura.			
Sir,				
Casual leave for		_ day(s) on		ay please be
granted on accoun-	t of			
Alternate arrangen	nent of classes is as und	ler:		
Class	Timings / Period	Room No.	Teacher's Name	Signature
ame (in Block Letters)			Designation:	
Department:			Dated:	
Jumber of Casual  eaves already availed:			Leave Applied for:	
otal Leaves:			Balance:	
Applicant Signature			Recommended of the Head of Dep	
Principal / Vice Pr	incipal		Signature of Record	 Keeper