

Department of Dairy and Poultry Science
Chittagong Veterinary and Animal Sciences University
Khulshi, Chittagong-4225

To
The Dean
Faculty of Veterinary Medicine
Chittagong Veterinary and Animal Sciences University
Khulshi, Chittagong-4225

Through: Head, Department of Dairy and Poultry Science, CVASU.

Subject: Application for Leave/Permission to be absent in the workplace.

1. Name:.....
2. Designation: Professor/Associate Professor/Assistant Professor/Lecturer/Office Asst.cum
Computer Operator /Lab. Technician/Technical Officer/Lab Attendant/Office Attendant
3. Leave from..... To.....
4. Total number of days:..... (day(s))
5. Type of leave: Casual leave/ Station leave/Earned leave/Study leave/Maternity
leave/Extra ordinary leave/others.
6. Purpose of leave:.....
7. Station leave:.....
8. Emergency contact number:.....
9. Replacement/Alternative arrangement in place. Yes/No
.....
.....
10. For international travel, relevant office order is presented or not: Yes/NA

Signature and seal of the applicant