

COLLEGE OF ENGINEERING ATTINGAL

Application for Medical Leave

1. Name :
2. Year and Branch :
3. KTU ID :
4. Dates on which duty leave is required :

5. Reason with proof/ Medical Certificate :

Details of Classes lost during Medical Leave

| | |
|-----------------------------|--|
| Subject (Theory) | |
| Dates on which classes lost | |
| Name of the faculty | |
| Subject (Theory) | |
| Dates on which classes lost | |
| Name of the faculty | |
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| Dates on which classes lost | |
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| Name of the faculty | |
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| Dates on which classes lost | |
| Name of the faculty | |
| Subject (Theory) | |
| Dates on which classes lost | |
| Name of the faculty | |
| Subject (IAB) | |
| Dates on which classes lost | |
| Name of the faculty | |
| Subject (IAB) | |
| Dates on which classes lost | |
| Name of the faculty | |

6. Details of previous medical leave / condonation:
7. Signature of the Student :
8. Date of Application :
9. Recommendation of staff advisor :
10. Recommendation of HOD :
11. Permitted / Not Permitted

PRINCIPAL

