Jamia Millia Islamia

Jamia Nagar, New Delhi- 110025

APPLICATION FOR THE GRANT OF STUDY LEAVE/ SABBATICAL LEAVE/ EXTRA ORDINARY LEAVE (VIDE PARA (4)(1) OF JAMIA ORDINANCE LIII

1.		/ Designation ock letters)	:			
2.	Depar	tment & Faculty	:			
3.	Date of	of appointment	:			
	(a) Pr	obation	:			
	(b) Co	onfirmation	:			
4.	Date of	of Birth	:			
5.	Kind of leave applied for:					
7.	Leave Required with Full pay Half pay Without pay with or without allowance					
8.	Duration of proposed leave and date of commencement of leave:					
9.	Purpose of leave.* :					
10.		In case of Research leading to Ph.D./ Post-Doctoral Degree/ Academic Pursuit to be undertaken. :				
	(i)		pic/ subject on which posed (Attache copy of syno	psis) :		
	(ii)	be undertaken.	titution where Research is to (Please submit documentary egistration slip etc.)	:		
	(iii)	Name of the S	upervisor(s) for Research wo	ork :		
12.	Whether leave is required to avail of a fellowship / employment/ assignment in India or abroad, give details. (please submit approval of funding/ appointing authority), :					
13.	Details of Amount of Scholarship/ Fellowship / Financial Assistance/ Salary (In rupees in case of India/ in US \$ in case of abroad) :					

^{*} Use separate sheet if more space is required.

14.	In case admission to higher course is proposed Indicate the name of the course together with the evidence for selection for admission.	:		
15.	Relevance of the proposed study/ programme to the duties presently the applicant is entrusted with.*	:		
16.	Whether the study leave or any other long term leave has been availed earlier. If yes, please mention the exact duration and purpose of such leave.	:		
17.	Any other relevant information the applicant would like to furnish in connection with his/her applications.	:		
to abid	I have read the terms and conditions for the grant of Lee by them in the event of such Leave being granted.	eave applied for and I undertake		
Encl:				
Date:		Signature of Applicant		
18.	Recommendation of the Head of the Department (While recommending please specify (a) & (b).			
(a)	(I) Total strength of teachers in the Department :			
(b)	Relevance of proposed study to the Department :			
(c)	Recommendation:			
To, The Dean, Faculty of		Head of the Department		
19.	Recommendation of the Dean of the Faculty			
To, The Re	egistrar, JMI.	Dean of the Faculty		

^{*} Use separate sheet is more space is required