



Royal University of Bhutan

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**PARO COLLEGE OF EDUCATION
ROYAL UNIVERSITY OF BHUTAN
POST BOX NO: 1245
PARO: BHUTAN**



STAFF LEAVE FORM

Date

Name: _____

Designation: _____

Nature of leave: _____

Leave at credit prior to leave applied for: _____

Period of leave (Date & No. of days): _____

Purpose of leave applied for: _____

Classes/Responsibility handed over to: _____

SIGNATURE OF PERSON TAKING OVER

SIGNATURE OF APPLICANT

Approved/ Not Approved

ADMINISTRATIVE OFFICER: _____

Approved/ Not Approved

PRESIDENT: _____

Note:

1. *For non-teaching staff Administrative Officer will approve the leave and for faculty the President will approve the leave.*
2. *Irrespective of nature of leave application should be produced well in advance (before availing leave).*
3. *For sanctioning of Medical/Maternity Leave a certificate from the competent Medical authority should be produced on rejoining of duty..*