UNIVERSITY OF HARIPUR

Hattar Road Near Swat Chowk Haripur, Khyber Pakhtunkhwa Pakistan

Phone: +92-995-920602; Email: registrar@uoh.edu.pk

APPLICATION FORM FOR LONG LEAVES

PART – I : For Applicant Only

1. Name of Applicant : _____

2. Particular Section Under Which Leave Is Admissible : _____

(Mention Section No. from University of Haripur Leave, Statutes)

3. Designation/Post Held : _____

4. Department/Section : _____

5. Date of Joining : _____

6. Continuous Service Period(Days) : _____

7. Purpose of Leave : _____

8. Leave already availed (during the year): _____

9. (a) Type of Leave Applied for : _____

(b) Period of Leave: From _____ *to* _____ *Total days:* _____

(c) Date of Commencement : _____

10. Address During Leave : _____

11. Telephone/Mobile Contact No. & E-mail : _____

Dated: _____ : _____

SIGNATURE OF APPLICANT

PART – II: For Chairperson/HOD/Sectional Head Only

12. Chairperson/Head of Department/Sectional Head Remarks:

During his absence, teaching/research/supervision/administrative responsibilities will be carried out by: _____

Number of faculty/staff members already on long leaves in the department: ☐

Recommended with Replacement ☐ *Recommended Without Replacement* ☐

Not Recommended ☐

Dated: _____ : _____

Chairperson/HOD/Sectional Head

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PART – III: For Dean (*in case of Teaching Faculty only*)

13. Dean's Remarks:

Recommended ☐ *Not Recommended* ☐

Comments, if any:

_____

Dated: _____ : _____

DEAN

PART – III (For HR Section Only)

14. **LEAVE RECORD**

S#	Type of Leave	Total Leaves	Leaves Availed	Balance
1	*Leave on full pay*			
2	*Leave on half pay*			
3	*Leave on Medical ground*			
4	*Disability Leave*			
5	*Anti-Rabic Leave/Quarantine Leave*			
6	*Quarantine Leave*			
7	*Study Leave*			
8	*Extraordinary Leave/Leave without Pay*			
9	*Leave Ex-Pakistan*			
10	*Hajj Leave*			
11	*Maternity/Paternity Leave*			
12	*Special Leave*			
13	*Leave not due*			
14	*Sabbatical Leave*			
15	*Duty Leave*			
16	*Leave Preparatory to Retirement*			
17	*Recreation Leave*			

Dated: _____ : _____

DEPUTY REGISTRAR–HR

PART – IV: For Registrar Only

15. (a) Leave applied for is admissible under Statute(s)Section No._____ and ***recommended by*** *Leave Committee fulfilling necessary conditions.* ☐

(b) Leave applied for is ***not recommended by*** *Leave Committee with the reason mentioned in meeting minutes of Leave Committee (attached).* ☐

Comments, if any:

_____

Dated: _____ : _____

REGISTRAR

FOR APPROVING AUTHORITY Only

16. Approved: ☐ *Not Approved:* ☐

Dated: _____ : _____

APPROVING AUTHORITY

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