

MEDICAL LEAVE (23-3-21 to 30-5-21)



SRK INSTITUTE OF TECHNOLOGY

Enikepadu, VIJAYAWADA- 521108 Ph. : 0866-2843839

LEAVE

CL EL CCL OD

No: **833**
 Name: Pratyushe A Designation: Ast. Professor
 Department: MBA Reason: Medical leave No of days applied: 2 months
 From: 23/3/2021 To: 30/5/2021 (Days). Balance leaves available (mandatory): _____

Class Work Arrangement	Subject / Lab	Date	Class Br. Sec	Period	Name of the Faculty	Signature
	NO CLASS WORK					
Approval of principal Sir Jaled						
22/3/21						
Faculty / Staff / Date		HOD / Date		Principal / Date		
<u>Pratyushe</u>		<u>[Signature]</u>		<u>[Signature]</u>		
		<u>20/5/21</u>				

[Signature]

PRINCIPAL
S.R.K. INSTITUTE OF TECHNOLOGY
ENIKEPADU, VIJAYAWADA.

Enikepadu,

22/03/2021.

To

The Principal,

SRK Institute of Technology,

Enikepadu.

Sub: Request for the grant of emergency medical leave
Since I am suffering from the problem of Endometriosis

Respected Sir,
I am Pratyusha.A, working as an Asst. Profe
in the department of Business Administration. From the la
one month, I am facing severe stomach ache & used
some tablets but the problem was not rectified, so,
I went to hospital and there some tests were
conducted. And it was recognised that I am suffering
from Endometriosis. Doctor has given me some tablets
and suggested me to not to do heavy work, not to go
for travelling and insisted a complete bed rest for
2 months. So, I am requesting you to grant me the
medical leave for two months. Kindly do this favour

Thanking you Sir,

Submitted to the Principal Sir
for sanction. She is applying
leaves frequently due to health issue.

Yours obediently,

Pratyusha.A
(Pratyusha).

Permitted
Principal
PRINCIPAL

S.R.K. INSTITUTE OF TECHNOLOG
ENIKEPADU, VIJAYAWADA.

Regd. No. 65010 (Andhra)

Ph : 08676 - 252846 (H)

G.V.R. CLINIC

GANNAVARAM - 521 101., Krishna Dt.

Dr. Gondi Venkateswara Rao,
B.Sc. M.B.B.S., (Jipmer)

Date..... 21/3/21

This is to certify
that A. Pruthi'sha working
in S.R.K. Institute of Technology
is suffering from Endometri-
-sis. For this she needs rest
and medication for 2 months
from 22-3-21.

G.V.R.

Dr. G.V. RAO
B.Sc., MBBS (JIPMER)
Regd. No: 65010
G.V.R. CLINIC
GANNAVARAM - 521 101

[Signature]

PRINCIPAL

S.R.K. INSTITUTE OF TECHNOLOGY
ENIKEPADU, VIJAYAWADA.



SRK INSTITUTE OF TECHNOLOGY

Enikepadu, VIJAYAWADA- 521148 Ph. : 0866-2843839

No.: **1111**

12/1/20

CL EL CCL OD

Name: T. Maha lakshmi Designation: Asst. prof

Department: EEE Reason: family Issue No. of days applied: _____

From: 14/12/20 To 31/3/21 Days. Balance leaves available (mandatory): _____

Subject / Lab	Date	Class B. Sec	Period	Name of the Faculty	Signature
		No class work.			

For 11/12/20 Date

8 / Date

[Signature] / Date

[Signature]

PRINCIPAL
S.R.K. INSTITUTE OF TECHNOLOGY
ENIKEPADU, VIJAYAWADA.

Date: 11/12/2020

Enikepadu.

To
The principal,
SRKIT,
Enikepadu.

Sub: Request for leave.

Sir!

I T. Venkata Maha lakshmi working as
Asst. professor in EEE department. I want leave
from 14/12/20 to 31/3/21 due to family issues
please grant me the leave.

Thanking you sir

yours faithfully

Maha Lakshmi

(T. Venkata Maha lakshmi)

forwarded
S. Sri Gowd
HEEE



PRINCIPAL
S.R.K. INSTITUTE OF TECHNOLOGY
ENIKEPADU, VIJAYAWADA.



SRK INSTITUTE OF TECHNOLOGY

Enikepadu, VIJAYAWADA- 521108 Ph. : 0866-2843839

LEAVE

CL

EL

CCL

OD

No.: **3421**

Name: Hameeda Khatoon Designation: Asst. Prof.

Department: CSE Reason: Medical leave No of days applied: 38

From: 18.8.21 To 4.10.21 () Days. Balance leaves available (mandatory): _____

Class Work Arrangement	Subject / Lab	Date	Class Br. Sec	Period	Name of the Faculty	Signature	

Faculty / Staff / Date 18/8/21

HOD / Date B. Lakshmi 5/10/21

Principal / Date [Signature]

[Signature]

PRINCIPAL

S.R.K. INSTITUTE OF TECHNOLOGY
ENIKEPADU, VIJAYAWADA.