



## Requisition for issue of No Objection Certificate Utilization of Research Laboratory

1	Employee ID	:	
2	Name of the Employee	:	
3	Designation	:	
4	Name of the Department	:	
5	Type of Leave	:	Academic Leave / On duty
6	Number of days required	:	
7	Duration of Use	:	From.....To.....
	Prefix / Suffix of holidays, if Any	:	Prefix ..... Suffix.....
8	Full details of Name of the Organization / Industry to visit	:	
9	Details of Research Laboratory / Centre facilities used during the visit period	:	
10	Attach necessary proof (if any)	:	
11	Number of days of academic leave / On duty last availed during the current year	:	
12	Class work adjustment:		

Date	Period Number	Class, Branch and Section	Alternative Arrangement		Signature	Date of Compensation
			Emp. ID	Name		

Date: \_\_\_\_\_

**Signature of the Applicant**

**Remarks of HOD:** Accepted / Not Accepted

Comments if any: \_\_\_\_\_

**Signature of HOD**

**Remarks of Dean of Research and external schemes:** Accepted /

Not Accepted Comments if any: \_\_\_\_\_

**Signature of Dean of Research and external schemes**

**Recommendation of the Principal:** Sanctioned / Not Sanctioned.

**PRINCIPAL**