

**SREE SANKARACHARYA UNIVERSITY OF SANSKRIT, KALADY**

**Application for Medical/Maternity leave of Research Scholars**

1. Name of the Research Scholar :  
Phone No. :  
E-mail ID :
2. Department :
3. Date of Admission of Ph.D Course :
4. Register Number of Research Scholar :
5. Name of fellowship availing such as UGC-JRF/ :  
SRF/E-grants/University Research Fellowship  
granted
6. Details of leave (other than Casual Leave) :  
applied for and period of leave
7. Whether the leave applied is with or without :  
fellowship
8. Details of Medical/Maternity Leave availed :  
previously during the tenure of the course  
period

**Date :**

**Signature with Name of Research Scholar**

**Name and Recommendation of Supervising Teacher**

**Counter signature of Head of the Department**