



Dated:- 20.10.2015

**LEAVE OF ABSENCE FOR REPRESENTING THE IIT MANDI AT EVENTS OUTSIDE
MANDI**

NAME _____ ROLL NO. _____ HOSTEL _____
EVENT _____ HOST INSTITUTION _____
FROM _____ TO _____ INCLUSIVE OF TRAVELTIME

Permission accorded by Chairperson, SAP

Dr. Arnav Bhavsar

CLASSES MISSED

Sr.No.	COURSE	INSTRUCTOR	DATES

Copy to:-

- Warden
- Instructors