APPLICATION FOR CASUAL LEAVE

Name of school	:
Name of teacher	:
Designation	:
No. of C.L already taken	:
No. of C.L now required with date	:
Reason for leave	:
Signature	:
Submitted to the H.M GHSS UPPAR favour of sanction APPLICATION FOR CASUAL LEAVE Name of school	
Name of teacher	:
Designation	:
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Submitted to the H.M GHSS UPPALA for favour of sanction	