



EASTERN UNIVERSITY, SRI LANKA

Application for Duty Leave

Name:	
Designation:	
Department:	
Date of First Appointment:	
No. of Days Leave Applied for:	
Date of commencement of leave:	
Date of expiry of leave:	
Reason for Duty leave:	
Whether EUSL Transport/Vehicle is used:	Yes/No
Whether supportive document is annexed:	
Name & Signature of Acting Officer: (Only if necessary/appropriate)	
Date and Signature of Applicant:	
Recommendation	
Recommended /Not Recommended	
Head of the Department/Discipline/ Unit	
Date:	
Office of the Senior Asst. Registrar/Assistant Registrar of the Faculty	
Whether entitled to obtain traveling claim / subsistence:	
Any other comments/Details:	
Senior Asst. Registrar/Asst. Registrar of the Faculty :	

Approved/Not Approved

.....

Dean of the Faculty

Informed to applicant on:

Subject Clerk