

**Maternity Leave Application for Ph.D. Scholars**

1. Name of the Research Scholar :
2. Department :
3. Campus :
4. Period of leave applied for :  
(Please enclose certificate date of confinement  
from doctor)
5. Saturday/Sunday and other holidays, if any,  
proposed to be prefixed/suffixed to leave :
6. Details of such types of leave availed :  
earlier and number of surviving children
7. Expected/Due Date & delivery or  
Delivery Date as the case may be :
8. Address during leave period
9. Mobile No. during leave :

Signature of the Research Scholar

Recommendation of Supervisor: -

Name of the Supervisor

Signature of Supervisor

10. Remark/recommendations of the  
School Research Committee (SRC)

Signature (with date)  
Designation