



अखिल भारतीय आयुर्वेद संस्थान

ALL INDIA INSTITUTE OF AYURVEDA (AIIA)

(आयुष मंत्रालय, भारत सरकार के अंतर्गत स्वायत्त संस्थान)

(An Autonomous Organization under the Ministry of AYUSH, Govt. of India)

APPLICATION FOR ACADEMIC LEAVE (AL)

1.	Name of Applicant:		
2.	Designation:		
3.	Department:		
4.	Purpose of Academic Leave (Paper accepted / Invitation to deliver lecture / Acceptance to attend workshop, CME, Symposium / Invitation to chair or co-chair session / acceptance to participate as delegate (attach evidence))		
5.	Number of Leave(s) applied		
6.	Dates of Leave(s) applied		
7.	Financial support applied for	Full / Reg. / TA-DA / Not Required	
8.	No. of events previous AL availed / applied in the current financial year		To be cross-checked and signed with remarks by Admin Section
	With full financial support		
	With split financial support	Reg:	TA/DA:
	Without financial support		
	Total		
9.	No. of days previous AL availed /applied in the current Financial Year		To be cross-checked and signed with remarks by Admin Section
	With full financial support		
	With split financial support		
	Without financial support		
	Total		
10.	Completed six months of service? (For AL in India/SAARC)		
11.	Completed probation & One year of service remaining? (For AL in abroad)		
12.	Any suffix/prefix holidays		
13.	Signature of Reliever		

Signature of Applicant

Recommendation & Signature of HOD

Director

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