## Shri Vile Parle Kelavani Mandal's NARSEE MONJEE COLLEGE OF COMMERCE & ECONOMICS (Autonomous) MUMBAI 400 056

## **APPLICATION FOR MEDICAL LEAVE**

FOR OFFICE USE ONLY   Date From to			
Number of working days			
Reason :			
Remark :			
Sign			
From Mr./Miss			
Class:	Div	Roll No	
Address:			
Date:Contact No. :			
Student Number:			
To, The Principal, Narsee Monjee College of Commerce & Economic Mumbai 400 056. Dear Sir,	cs, Autonomc	ous	
I could not attend my regular classes from	to	)	(both
days inclusive) on account of the following illness	<b>.</b>		
I have remained partially / totally absent from	1 the		
Examination / Test held on te	0	on account	of the
following health problem.			
Medical Certificate datedissue			
as required by the rule is attached.			
Any other reason of Absentee other than Medica	l reason:		

Yours faithfully,

(Signature of Student)

(Countersign of Guardian)

## Rules:

- 1. Fully completed and signed application form along with photocopy of medical certificate should be given in office during office hours on any working day within **THREE DAYS** of resuming attendance.
- 2. The medical certificate submitted does not amount attending classes or examination or test. It only explains the medical condition of student.
- 3. Medical Certificate without specifying the exact dates should not be accepted.
- 4. If student is absent for more than three days, photocopies of medical report –pathology test, X-ray reports etc. should be submitted.

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