



INSTITUTE OF AERONAUTICAL ENGINEERING

(Autonomous)

Dundigal - 500 043, Hyderabad

Application for Examinership

1	Name of the Applicant	:				
2	Employee ID	:				
3	JNTUH Unique ID	:				
4	Designation	:				
5	Department	:				
6	Type of Leave	:	ACADEMIC LEAVE (AL)			
9	No. of Days Required	:				
10	Period	:	From		To	
11	Activity Name	:	Observer / Examiner / Spot Valuation / Others			
12	Name of the Institute and Place	:				
13 Class Work Adjustment:						
Date	Period Number	Class, Branch and Section	Alternative Arrangement		Signature	Date of Compensation
			Emp. ID	Name		
Academic Leaves Availed in Current Academic Year :						
S. No	Name	Report submitted	Date	Seminar presented	Date	
Date:						
Signature of the Applicant						
Forwarding Remarks						
Permitted / Not permitted						
Comments if any:					Signature of HOD	
Approved / Not Approved						
Comments if any:					PRINCIPAL	