

To,
The Director/Registrar
UM-DAE CEBS
University of Mumbai
Kalina Campus, Mumbai - 400 098

Sub: Joining Report after availing _____ leave

Sir/Madam,

I _____ hereby join duty on _____ (Forenoon/Afternoon)
after availing HPL/EL/Vacation leave/Duty Leave for _____ days from _____ to
_____.

I am also enclosing herewith Medical certificate /Medical Fitness Certificate. (Application in case of leave on medical grounds).

Date: _____

Forwarded

Signature

Name

School Chair/Reporting Officer

Designation