Komar University of Science and Technology

Monthly Leave Permit (2025) office of HR

KUST HR 311

Name: .....

Department:.....

Post title: .....

Day	Date	Time (From-To)	Total hours	Leave Type(N,S)	Employee signature	Replacement signature	Supervisor signature
Tuesday	1-Jul-25						
Wednesday	2-Jul-25						
Thursday	3-Jul-25						
Saturday	5-Jul-25						
Sunday	6-Jul-25						
Monday	7-Jul-25						
Tuesday	8-Jul-25						
Wednesday	9-Jul-25						
Thursday	10-Jul-25						
Saturday	12-Jul-25						
Sunday	13-Jul-25						
Monday	14-Jul-25						
Tuesday	15-Jul-25						
Wednesday	16-Jul-25						
Thursday	17-Jul-25						
Saturday	19-Jul-25						
Sunday	20-Jul-25						
Monday	21-Jul-25						
Tuesday	22-Jul-25						
Wednesday	23-Jul-25						
Thursday	24-Jul-25						
Saturday	26-Jul-25						
Sunday	27-Jul-25						
Monday	28-Jul-25						
Tuesday	29-Jul-25						
Wednesday	30-Jul-25						
Thursday	31-Jul-25						

Leave type: *N*: *Normal*, *S*: *Sick*.

Signature of Director

Muhammad Omer Ali