**ON DUTY PERMISSION SLIP**

Date:\_\_\_\_\_\_\_\_\_\_\_

I Mr./Ms.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Emp.No.\_\_\_\_\_\_\_\_\_\_, Designation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_will be on Training / Official visit to **Training / official duty details:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Duty for the period of \_\_\_\_\_\_\_\_\_\_\_\_\_ days i.e., From \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Request you for regularization of my attendance for the above mentioned period.

Empl Signature:

Empl Contact No:

Approved / Rejected

Signature

(Head of the Department)