**Out Pass Intimation Form**

**Date..............**  
  
**Name:.............................................**  
  
**Section /department..................................**  
  
**Permission From......................AM/PM To........................AM/PM**  
  
**Reason............................................ ......................................**  
**.................................................. ...........................................**  
  
  
  
**.................. ........................ ....................**  
**Sign.of Employee Hr & Admin. Sign Approval By HOD**