



NATIONAL INSTITUTE OF TECHNOLOGY: TIRUCHIRAPPALLI -620 015.

ABSENTEE STATEMENT FOR THE MONTH OF _____

Department : _____ Engineering

Specialization : _____

Sl. No	Roll. No.	Name of the Student / Scholar	General / QIP Sponsored	Dates of Absence	Details of Leave		Allotted academic work satisfactorily done or not YES/NO	
					Leave already sanctioned till end of previous month			Leave Sanctioned or not
					CL	ML		
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								

Head of the Department