

Form No.1

Details regarding the prevention of vacation of teachers in the University Department of _____ during the year _____ (from April 15 to June 15)

1	2	3	4	5	6
Sl.No	Name & Designation of the Teacher	Period of vacation to be prevented	No. of days of vacation to be prevented	Purpose for which the vacation is to be prevented (Nature/quantum of work/working hours per day)	Total working hours per week during the vacation that is to be prevented

Place

Office seal

Name & Signature of HOD

Date :