

From

Dr. S. Kulkarni

Asst. Professor

Dept. of Commerce (Finance)

NGM College, Pollachi.

To

The Principal

NGM College

Pollachi.

Through

The Dean

NGM College

Pollachi.

 24/6/23

Respected Sir,

Sub: Requisition for OD - Reg.

As Bharathidasan University Valuation extended up to 26.06.23. I kindly request you to allow me to attend the valuation from 24.06.23 to 26.06.23, and consider my absence as on other duty.

Yours Faithfully,
S.B

Pollachi

24.06.23

24.06.2023
Pollachi

From

Dr.T.S.Kavitha
Associate Professor
Department of Commerce
Nallamuthu Gounder Mahalingam College
Pollachi.

To

The Principal
Nallamuthu Gounder Mahalingam College
Pollachi.

Through

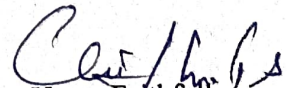
The Dean Academic
Nallamuthu Gounder Mahalingam College
Pollachi.

Respected Sir,

Subject: Request for On Duty – reg.

I am writing this letter to inform you that, I have been appointed as UG Examiner in Central Valuation of Bharathiar University, Coimbatore. So that, kindly permit me to go for the Central Valuation of One day (24.06.2023). I request you to consider ~~these two~~ ^{One} days leave as On Duty.

Thank You,


Yours Faithfully,
(Dr.T.S.Kavitha)

Forwarded.


24/06/23
(Associate Prof & Head)

From

Dr.N.Bagyalakshmi

Associate Professor and Head

Department of Commerce

NGM College, Pollachi

To

The Principal

NGM College, Pollachi

Through

The Dean Academic

NGM College, Pollachi

Respected Sir

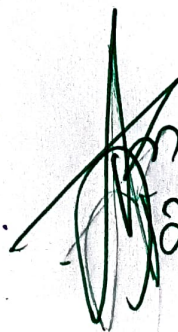
Sub: Requisition of On Duty-reg

I have been appointed as Chief Examiner – Commerce Board in the Bharathiar University Central Valuation held from 21st June 2023 at NGM College, Pollachi. It will be extended till 26th June 2023. Hence, I request you to permit me to attend the same and treat my absence on 24th and 26th June 2023 as On Duty. (OD).

Thanking you

Yours faithfully

Place: Pollachi.
Date: 24/06/23.


24/06/23

N. Bagyalakshmi
24/06/23.

From

Ms. A. Gomathi
Assistant Professor
Department of Commerce - BI
NGM College
Pollachi-642001.

To

The Principal
NGM College (Autonomous)
Pollachi-642001.

Through:

The Dean
NGM College
Pollachi-642001.

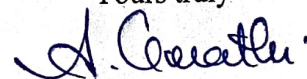
Respected Sir,

SUB: Request for on duty -reg.

This is bring to your kind notice that, as I have been appointed as an external examiner at Bharathiar University Central valuation on 24/06/2023& 26/06/2023. So I request you to kindly permit me to accept the same and consider my absence as **On Duty on** 24/06/2023& 26/06/2023.

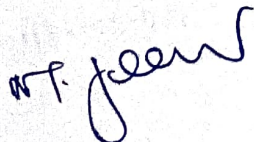
Thanking you.

Yours truly

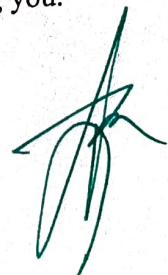

(Ms. A. Gomathi)

Place: Pollachi

Date: 24/06/2023







From

24.06.23

Pollachi

Dr. D. RAJASEKARAN

Asst. Professor of Commerce B & I
Mym College

Pollachi

To

The Principal
Mym College
Pollachi

Through

The Head of the department
The Dean (Academic)
Mym College
Pollachi

Respected Sirs,

Sub: Request for on duty - rg.

As I am in Bharathiar University Central
valuation, I am not able to come to college
for 24.06.23 and ~~26.06.23~~. So kindly consider
my absence as on duty for those days.

Thank you



Yours truly
Dr. D. Rajasekaran

~~Received~~
~~24/06/2023~~

~~24/06/23~~

Encl: Copy of BU valuation order

GL5

BHARATHIAR UNIVERSITY, COIMBATORE - 641 046

ATTENDANCE CERTIFICATE

This is to certify that Mr. / Ms. / Dr. T. S. Suriyaprabha,
Assistant Professor, Dept of English Language, N. U. N.
College, Pollachi
has attended..... Central valuation.....
in the University campus / Govt. Arts College, Coimbatore
on / from 21.6.2023 to 24.6.2023 both days
inclusive.

1 P. Y. C.
24/6/23

Dr. Ruby CHRISTIE. L
CHAIRMAN

Mr. J. J. J.
24.6.23
CAMP OFFICER
Government Arts College
Coimbatore - 641 018.
Controller of Examinations.

GL5

BHARATHIAR UNIVERSITY, COIMBATORE - 641 046

ATTENDANCE CERTIFICATE

This is to certify that Mr. / Ms. / Dr. R. VIDWIAKALYANI (AA0634)
ASSISTANT PROFESSOR, DEPT. OF B.COM E-COMMERCE,
has attended BU Central Valuation
in the University campus / NGM COLLEGE
on Pollachi / from 21/6/2023 to 26/6/2023 both days
inclusive.

8
24/06/2023
(CHIEF EXAMINER)


Controller of Examinations.

CAMP OFFICER
Bharathiar University Valuation Center,
NGM College, Pollachi 642001.
Ph. : 04259-234868 / 70

FROM

Dr. T. Suriyaprabha
Assistant Professor
Department of English
N.G.M. College
Pollachi

TO

The Principal
N.G.M. College
Pollachi

Through

The Deans
N.G.M. College
Pollachi

Respected Sir,

Sub: Requisition to avail on duty -
-reg

I have been appointed as an external
examiner to value for answer scripts
at Government Arts College, Coimbatore
from 21.06.2023 to 24.06.2023. In
this regard I kindly request you to
consider my absence on 24.06.2023 as
other duty.

Thanking you



Yours faithfully,

T. Sri.

26.06.2023,
Pollachi.

Forwarded

Shree-N/26/6/23

150
26/6

From

Dr. E. Rama Devi

Associate Prof. and Head

Department of Computer Science with Data Analytics

NGM College

Pollachi

To

The Dean-Academic

NGM College

Pollachi

Respected Sir,

This is for your kind information that I have been nominated as a member of the Inspection commission to inspect and report on the infrastructural facilities made available in Dr. N.G.P College of Arts and Science, Coimbatore, for the Permanent increase in intake for the PhD Computer Science (Full Time and Part Time) on 12.07.2023. In this regard, I request you to permit me to conduct the same and consider my absence as on other duty.

Thank you

Yours' sincerely

(Dr.E. Rama Devi)

Place: Pollachi

Date: 07.07.2023

Handwritten notes in red ink:
Mrs. Rama Devi
Please inform
27/7/23

27.07.2023
Pollachi.

From

S. Vigneshkumar,
Asst Professor in Socialwork,
NSS- Programme Officer,
NGM College, Pollachi.

To

The Principal,
NGM College, Pollachi.

(Through proper channel)

Respected Sir

Sub: requesting permission to attend
University - NSS Programme

Sir as per the direction by NSS Regional
Directorate, Chennai, Ministry of Youth Affairs & Sports
Govt of India. conducting "Yuva Samvad" Programme
on 28.07.2023 at our Bharathiyar University, Gimbature
In connection to this I was invited by NSS
University Co-ordinators. to attend the Program, so
I kindly request you to permit me to attend the
Same. Please do the needful. LRP

Thanking You

Forwarded
Vignesh
24/7

Forwarded
L. Ravi
24/07/23

Yours faithfully
S. VIGNESHKUMAR

(Autonomous) Pollachi - 642001
An ISO 9001: 2015 Certified Re-Accredited by NAAC

Department of Social Work (MSW)

ON DUTY FORM

Date of submission: 14.08.2023

Name of faculty : S. VIGNESH KUMAR

Purpose

☒ Field work

OBSERVATION VISIT

☐ Seminar/work shop

• National Child Labour Project, Collectorate, - Cbe.

☐ Paper presentation

Sakthi Sugar Merchants Palayam
(A division of Sakthi Sugars)

☐ Others (specify) _____

Date: From 16.08.2023 to 17.08.2023

No of days : 2 days

Signature : *Jed. Mill*

Recommended by

HOD

DEAN

Approved by

1 by 
PRINCIPAL

From

Dr. P. Gurusamy
Assistant Professor
Department of B.Com-BPS
NGM College
Pollachi-642001.

To

The Principal
NGM College (Autonomous)
Pollachi-642001.

Through:

Deans
NGM College
Pollachi-642001.

Respected Sir,

**SUB: Request for on duty connected with Education Loan Melaa in MCT
Campus on 16/08/2023 –reg.**

This is to kindly inform you that, as I have been appointed as a scholarship coordinator (SF) for applying the Student's Education Loan on 16/08/2023 in MCT Campus. So, I request you to kindly permit me to accept the same and consider my absence as **On Duty** on 16/08/2023.

Thanking you.

Yours truly

(Dr. P. Gurusamy)

Received:
H. J.
16/08/2023

Forwarded
M. — mm
14/8.

From

Dr. N. Radha

Dept of English (UG/PG/SF)

NAM college, Pollachi.

To

The Principal,
NAM college, Pollachi

Encl

Through

The Deans / Director
NAM college, Pollachi.



Respected Sir,

Sub: Permission to receive the degree in the 38th
Convocation at Bharathiar University reg:-

I wish to receive my Doctoral degree
in the 38th Convocation held at Bharathiar
University on 24/8/23 (Thursday). I kindly
request you to permit me to receive the same
by considering me favourably and treating my
absence from the Campus as on other duties.
I have herewith attached the call letter for
your perusal.

Thanking you,

Yours Sincerely,

Dr. N. Radha

Place: Pollachi

Date: 23/8/23

Forwarded

M - mm
23/8

From

23.08.2023

Dr.T.Manikandan

Pollachi

Assistant Professor

Department of Business Administration

NGM College

Pollachi

To

The Principal

NGM College

Pollachi

Through

The Dean Academic

NGM College

Pollachi

Respected Sir

SUB: Requisition for On Duty on 24th August, 2023 -REG

Sir, I am happy to share that I am going to get **PhD degree -Convocation** in bharathiar university, Coimbatore on 24th August 2023. So I kindly request to provide ON DUTY for the same

Thanking you,

Yours Truly,

T.Manikandan

Encl : Convocation Letter

Forwarded

D.R. 23.8.23

[1.8.2023]

Forwarded

M - Rm 23/8

From,

A.Muruganandham,

Assistant Professor,

Department of Computer Applications,

Nallamuthu Gounder Mahalingam College, Pollachi.

To,

The Principal,

Nallamuthu Gounder Mahalingam College,

Pollachi.

Through,

The Academic Dean,

Nallamuthu Gounder Mahalingam College,

Pollachi.

Respected sir,

SUB: Requisition for Sanctioning On-Duty – Reg.

As I have invited to Nehru Arts and Science College to act as External Examiner for Practical Examination to be held on 10-10-2023 at 9.20 AM. Kindly grant me On-Duty permission for attending the same. I have enclosed the order copy for your reference.

Thanking you



Yours Truly,

Date: 09-10-2023

Place: Pollachi

Forwarded
M - 9/10

Hanag
9/10/23

19.10.2023
Pollachi

From

Dr.N.Ponsabariraj
Assistant Professor
Department of Commerce (E-Commerce)
Nallamuthu Gounder Mahalingam College (Autonomous)
Pollachi

To

The Principal
Nallamuthu Gounder Mahalingam College (Autonomous)
Pollachi

Through

1. The Head of the Department
2. The Dean Academic

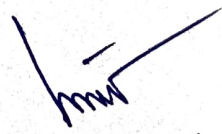
Respected Sir,

Sub: Request 'ON-Duty' for act as a resource person - Reg.

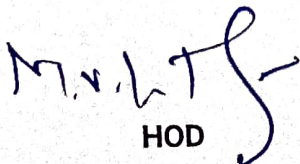
I act as a resource person for the topic on **"Research Methodology using SPSS"** conduct by the **Department of Commerce (Professional Accounting), KPR College of Arts Science and Research, Coimbatore** on 20/10/2023 (Friday). Hence, I request you to grant me 'ON-Duty' for the same above reason.

Thanking you.

Yours faithfully


(N.Ponsabariraj)


PRINCIPAL


HOD


DEAN

Encl: As above details

From

C.R. Durga devi
Assistant Professor
Department of Information Technology (SF)
NGM College
Pollachi-1

To

The Principal
NGM College
Pollachi-1

Through

The Academic Dean
NGM College
Pollachi -1

Respected Sir,

Sub: On Other Duty- Reg.

I have been appointed as an External Examiner by Bharathiar University to conduct End semester practical exam in Computer Science Department, **Yuvaguru College of Arts & Science**, Pollachi on 10th NOVEMBER 2023. So I request you to grant me permission to do the same by considering my absence as On- Other -Duty

Thanking You

Yours Faithfully

(Dr. C.R. Durga devi)

Dr. C. R. D - devi

Date : 4.11.2020

Place : Pollachi

Forwarded by

K. Govindarajan

Forwarded
M - 6/11

Pollachi
9/11/23

From

Dr. G. Vijaya Chithra
Assistant Professor
B.com(CA) Dept
NGM College, Pollachi.

To

The Principal
NGM, College, Pollachi

Through

The Dean Academic
NGM College, Pollachi.

Respected Sir,

Sub: Requisition to permit and provide OD - reg

This is to bring into your kind notice that
I have been appointed as external examiner for Commerce
Department, Sri Saraswathi Thyagaraja College Pollachi
on 14.11.23. In this regard, I request you to permit
me and provide on-duty for the same.

Thank You

Encl: Appointment Order

Yours Sincerely
Dr. G. Vijaya Chithra 9/11/23


09/11/23
H.O.D.

Shree M
only on 14.11.23
Suma
14/11/23

forwarded
M-hm
15/11



KAMALAM COLLEGE OF ARTS AND SCIENCE

(Affiliated to Bharathiar University and Recognized by the UGC under Section 2 (f) & 12 (B))
(G.O. No. 251, Certified Institution)

Pollachi - Udumalpet, (Kongalnagaram Pirivu) ANTHIYUR
Udumalpet Tk, Tirupur Dt. Pin - 642 122, Tamilnadu.

Website : www.kamalamcas.ac.in

Cell : 83000 53388, 83000 43388, 83001 53388

Ref. No. :

Date :

KCAS/BU-PRAC/ATT/06/NOV.2023

08/11/2023

ATTENDANCE CERTIFICATE

This is to certify that Dr. R. Deepa, Assistant Professor, PG Department of Computer Science, NGM College, Pollachi has acted as an External Examiner for the Bharathiar University Practical Examinations held on 08/11/2023.

PRINCIPAL

DR. S. BRINDA, M.A., M.PHIL., MBA., Ph.D.
Principal,
Kamalam College of Arts & Science,
Kongalnagaram Road, (Opp. Power House),
Anthiyur, Udumalpet (Tk),
Tirupur (Dt), Tamilnadu - 642 122.



KARPAGAM ACADEMY OF HIGHER EDUCATION
(Deemed to be University)
(Established under section 3 of UGC Act, 1956)
(Accredited with A+ Grade by NAAC in the Second Cycle)
Pollachi Main Road, Eachanari Post, Coimbatore - 641 021.

Office of the Controller of Examinations

24.11.2023

ATTENDANCE CERTIFICATE

This is to certify that Dr/Mr/Ms. SHARMILA S, Assistant/Associate
Professor/Professor, Department of Computer Science (SF),
NGM College, Pollachi has
served as an External Examiner for End Semester Practical / Studio / Viva-Voce Examination during
November 2023 at our Institution on 24.11.2023.

PPW 24/11/2023
CONTROLLER OF EXAMINATIONS
Controller of Examinations
Karpagam Academy of Higher Education
(Deemed to be University)
(Established Under Section 3 of UGC Act 1956)
Pollachi Main Road, Eachanari Post,
Coimbatore - 641 021, Tamil Nadu

From

Dr K.Haridas

Associate professor and Head

Department of Computer applications

N G M College

To

The Principal

N G M College

Thru

The Academic Dean

N G M College

Respected Sir,

Sub: Requisition for OD -reg:

I have been appointed as a Doctoral Committee member in Computer Science for the research scholar Mrs R.Krthikeyani on 26.2.24 at Govt Arts College ,Udumalpet. Kindly permit me and consider my absence as On Other Duty.

Yours faithfully

(Dr K.Haridas)

Pollachi

23.2.24

Forwarded
M - hcm
23/2

Practical On-Duty Permission Letter

Date: 11.03.2024

From

Mr. R. Sekar,
Assistant Professor,
Department of Information Technology,
NGM College,
Pollachi-1

To

The Principal,
NGM College,
Pollachi -1.

Through

The Academic Dean,
NGM College,
Pollachi -1

[Handwritten signature]
12/3/24

Respected Sir,

Sub: On Other Duty (OD) - Reg.

As I am appointed as an **External Examiner** by Bharathiar University to Conduct Practical to B.Sc Computer Science Department in Pollachi College of Arts & Science, Poosaripatti, Pollachi on **18.03.2024 Full Day(FN & AN)**. So, I kindly request you to grant me permission to do the same and considering my absence as On- Other - Duty.

Thanking You,

Yours Faithfully,

Forwarded
[Signature] *mm*
19/3

[Signature]
11/03/2024
(R. SEKAR)

Pollachi

12.03.2024

From

N. Arulkumar
Assistant Professor
UG Department of Computer Science (SF)
NGM College
Pollachi.

To

The Principal
NGM College
Pollachi.

Through

The Dean-Academic
NGM College
Pollachi.

Respected Sir,

Sub: Requisition for On-Other Duty - Reg.

I have been appointed as the External Examiner in Bharathiar University for the BSc. Computer Science practical exam in Bishop Thorp College, Dharapuram on 15.03.2024. So, I request you to kindly grant me the permission for the same and consider my absence as On-Other Duty.

Thanking You,

Yours Sincerely,

N.A
[N. ARULKUMAR]

forwarded
12/3

forwarded

11 - mm
12/3

12/3

From

Dr. P. ANITHA

Associate Professor & Head

PG Department of Commerce (CA)

NGM College, Pollachi – 642 001

To

The Dean Academic

NGM College

Pollachi – 642 001

Respected Sir,

Sub: Permission to act as External Examiner and to avail OD – reg.

As I am deputed by to act as an External Examiner by Bharathiar University in Government College of Arts & Science, Udumalpet on 20-03-24, I kindly request you to permit me to attend the same and treat my absence as on other duty.

Thank you.

Yours truly

Place : Pollachi

Date : 12.03.2024.

Encl. : Photocopy of Communication


(Dr. P. ANITHA)

*Forwarded to
M. M.
12/3*

From

Dr.B.Azhagusundari
Associate Professor, Dept of CS with AI & ML
NGM College
Pollachi.

To

The Principal
NGM College
Pollachi.

Through

The Academic Dean
NGM College
Pollachi.

Respected Sir,

Sub: On other duties regd...

This is for your consideration that I had been appointed as an UG External Examiner for Bharathiar University Practical Examination to be held at Pollachi College of Arts and Science Poosaripatti on 18.03.2024. In this regard I request you to grant me permission to attend the same and consider my absence as on other duties.

Thank You.

Forwarded
Khilati's.

Forwarded
mhm
14/3



Yours' Sincerely

(Signature)
(Dr.B.Azhagusundari)

Date: 13.03.2024

Place: Pollachi

14.03.2024

Pollachi

From

Dr.M.V.Sathiyabama
Associate Professor & Head,
Department of Commerce (E-Commerce)
NGM College
Pollachi.

To

The Principal
NGM College
Pollachi

Through

The Dean Academic
NGM College
Pollachi.

Respected Sir,

Sub: Requisition of OD on 19.03.2024-reg

As i have been appointed as as external examiner to conduct practical examination on 19.03.2024 at Akshaya college of Arts & Science, Coimbatore. I request you to kindly consider my absence as On Other Duty.

Thanking You



Yours Faithfully

(Dr.M.V.SATHIYA BAMA)

forwarded
M - smm
16/3

From
Dr. S. Niraimathi
Associate Professor
Department of Computer Science with
Artificial Intelligence & Machine Learning
NGM College
Pollachi

To
The Principal
NGM College
Pollachi

Through
The Dean-Academic Affairs
NGM College
Pollachi

Respected Sir,

Sub: Request to permit for on Other Duties – regd..

This is for your consideration that I have been appointed by the Bharathiar University as an External Examiner for the ongoing Semester practicals, which is scheduled to be held on 19/03/2024 at Pollachi College of Arts & Science. In this regard I request you to permit me to attend the same and consider my absence as on Other Duties

Thank You

Yours' Sincerely

(Dr.S.Niraimathi)

Date: 16.03.2024
Place: Pollachi

forwarded
M — 18/03/19/13



18th March 2024
Pollachi

From

Prakalathan.A,
Assistant Professor,
PG Dept of COMMERCE (CA),
NGM College,
Pollachi - 642001.

To

The Principal,
NGM College,
Pollachi - 642001.

Through

The Dean Academic
NGM College,
Pollachi - 642001.

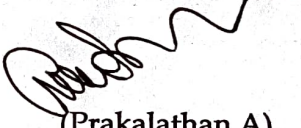
Sir,

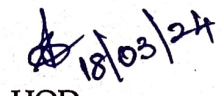
Sub: Request for 'Other Duty' - reg.

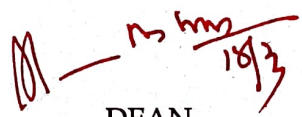
I have been appointed as an External Examiner by the Bharathiar University to conduct the practical examination in the Kamalam College of Arts & Science, Udumalpet on 19/03/2024. Hence I request you to grant me 'Other Duty' for one day i.e. on 19/03/2024. Classes has been Adjusted.

Thanking you.

Yours faithfully,


(Prakalathan A)


HOD


DEAN


PRINCIPAL

NALLAMUTHU GOUNDER MAHALINGAM COLLEGE, POLLACHI

CASUAL LEAVE APPLICATION

Name : B. Kalaiselvi
Designation and Department : Asst. Prof. in B.Sc. IT
Period of Leave : From 14.3.2024
To
Number of days : 1 (one day)
Whether permission is required to avail of the holidays preceding, succeeding the period of leave : -
Reasons for the leave : Condolence
Details of alternate arrangement of the work for the leave period are shown overleaf.

Date : 14.3.2024


Signature

RECOMMENDED AND SUBMITTED

Date : 14.3.2024

forwarded



Signature of the
Head of the Department

C.I. already availed of

..... days


ORDERS OF THE PRINCIPAL

From

K.Santhi
Assistant Professor,
Department of Human Excellence,
NGM College,
Pollachi.

To
The Principal
NGM College,
Pollachi.

Through
The Dean,
NGM College,
Pollachi

Respected Sir,

Sub: casual leave for the demise of Mother - in - law reg.

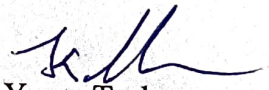
My Mother- in - law had passed away on 26.02.2024. So I could not come to the college from 26.02.2024 to 08.03.2024. kindly considers my leave as casual leave. I kindly request you to do the favor to me.

Thank You.

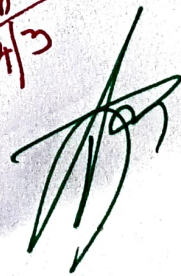
S. Jeyakumar.
12/3/2024.
Head, Dept. of Human
Excellence

Forwarded

hmp
14/3


Yours Truly

K.Santhi



NALLAMUTHU GOUNDER MAHALINGAM COLLEGE, POLLACHI

CASUAL LEAVE APPLICATION

Name : *D. Sonnija*
Designation and Department : *Assistant professor, Pk Botany*
Period of Leave : From *15.03.2024*
To :
Number of days : *1 day*
Whether permission is required to
avail of the holidays preceding,
succeeding the period of leave :
Reasons for the leave : *Health issue*

Details of alternate arrangement of the work for the leave period are shown overleaf.

Date : *14.03.2024*

D. Sonnija
Signature

RECOMMENDED AND SUBMITTED

Date : *14.03.2024*

forwarded
11 *15/3/24*

[Signature]
Signature of the
Head of the Department

C.I. already availed of
..... days

[Signature]
ORDERS OF THE PRINCIPAL

NALLAMUTHU GOUNDER MAHALINGAM COLLEGE, POLLACHI

CASUAL LEAVE APPLICATION

Name : Dr. N. PONGASABARAJ

Designation and Department : Assistant Professor (E-Commerce)

Period of Leave : From 16.03.2024
To 16.03.2024

Number of days : Half Day

Whether permission is required to avail of the holidays preceding, succeeding the period of leave : None

Reasons for the leave : going to Hospital

Details of alternate arrangement of the work for the leave period are shown overleaf.

Date : 16.03.2024

Signature [Signature]

RECOMMENDED AND SUBMITTED

Date :

Signature of the
Head of the Department

C.I. already availed of

..... days

ORDERS OF THE PRINCIPAL

NALLAMUTHU GOUNDER MAHALINGAM COLLEGE, POLLACHI

CASUAL LEAVE APPLICATION

Name : D. Divya
Designation and Department : Assistant Professor in M.com IB
Period of Leave : From 18.3.2024
To :
Number of days : 1 day
Whether permission is required to avail of the holidays preceding, succeeding the period of leave :
Reasons for the leave : Going to attend my II DC meeting
Details of alternate arrangement of the work for the leave period are shown overleaf.

Date : 15.3.2024

DNF
Signature

RECOMMENDED AND SUBMITTED

Date : 15/03/2024

Signature of the
Head of the Department

C.I. already availed of
..... days

ORDERS OF THE PRINCIPAL

NALLAMUTHU GOUNDER MAHALINGAM COLLEGE, POLLACHI

CASUAL LEAVE APPLICATION

Name : D. YASHOTHA
Designation and Department : Asst. Professor.
Period of Leave : From 22.03.2024 2.00 Pm
To 22-03-2024 6.00 Pm
Number of days :
Whether permission is required to
avail of the holidays preceding,
succeeding the period of leave : Half-a-day
Reasons for the leave : Emergency

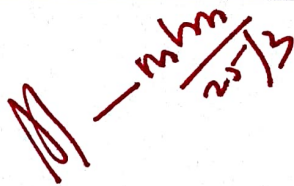
Details of alternate arrangement of the work for the leave period are shown overleaf.

Date : 22/03/2024


Signature

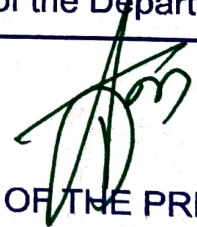
RECOMMENDED AND SUBMITTED

Date : 22/03/2024




Signature of the
Head of the Department

C.I. already availed of
..... days


ORDERS OF THE PRINCIPAL

NALLAMUTHU GOUNDER MAHALINGAM COLLEGE, POLLACHI

CASUAL LEAVE APPLICATION

Name : Dr M. DEEPA
Designation and Department : Assistant professor in B-com
Period of Leave : From 03-04-2024
To
Number of days : one day
Whether permission is required to avail of the holidays preceding, succeeding the period of leave :
Reasons for the leave : went ~~going~~ to hospital

Details of alternate arrangement of the work for the leave period are shown overleaf.

Date : 3/4/24


Signature

RECOMMENDED AND SUBMITTED

Date : 03/04/2024


Signature of the
Head of the Department

C.I. already availed of
1 1/2 days


ORDERS OF THE PRINCIPAL

NALLAMUTHU GOUNDER MAHALINGAM COLLEGE, POLLACHI

CASUAL LEAVE APPLICATION

Name : Dr. L. Ranjit
Designation and Department : Assistant Prof in Social Work
Period of Leave : From 04.04.2024
To :
Number of days : 1/2 day (Half day)
Whether permission is required to avail of the holidays preceding, succeeding the period of leave : Yes
Reasons for the leave : Not well going to hospital.

Details of alternate arrangement of the work for the leave period are shown overleaf.

Date : 04.04.2024

L. Ranjit
Signature

RECOMMENDED AND SUBMITTED

Date : 04.04.2024

M. M. M. A/4

L. Ranjit
Signature of the
Head of the Department

C.I. already availed of

..... days

ORDERS OF THE PRINCIPAL

NALLAMUTHU GOUNDER MAHALINGAM COLLEGE, POLLACHI

CASUAL LEAVE APPLICATION

Name : M. PREM
Designation and Department : Assistant Professor. B.com - Finance
Period of Leave : From 06.04.2024 1 day.
To
Number of days : 1
Whether the permission is required to
avail of the holidays preceding,
succeeding the period of leave :
Reasons for the leave : Going to Condolence (Chennai)

Details of the alternate arrangement of the work for the leave period are shown overleaf.

Date : 05.04.2024


Signature

RECOMMENDED AND SUBMITTED

Date : 05.04.2024


Signature of the

Head of the Department

C.I. already availed of

2 1/2 days


ORDERS OF THE PRINCIPAL

NALLAMUTHU GOUNDER MAHALINGAM COLLEGE, POLLACHI

CASUAL LEAVE APPLICATION

Name : D. Dinya
Designation and Department : Asst Prof in M.Com IB
Period of Leave : From
To 15/04/2024 (Fri)
Number of days : 1/2 Day
Whether permission is required to
avail of the holidays preceding,
succeeding the period of leave :
Reasons for the leave : Attending a condolence.

Details of alternate arrangement of the work for the leave period are shown overleaf.

Date : 15/04/2024

DMF
Signature

RECOMMENDED AND SUBMITTED

Date : 15/04/2024

Signature of the
Head of the Department

C.I. already availed of
1/2 days

ORDERS OF THE PRINCIPAL

NALLAMUTHU GOUNDER MAHALINGAM COLLEGE, POLLACHI
CASUAL LEAVE APPLICATION

Name : R. VISALAKSHI
Designation and Department : ASSISTANT PROFESSOR, Department of BBA
Period of Leave : From 18.01.2024
To
Number of days : HALF-A-DAY (FN)
Whether permission is required to avail of the holidays preceding, succeeding the period of leave :
Reasons for the leave : Condolence

Details of alternate arrangement of the work for the leave period are shown overleaf.

Date : 18.01.2024

R. Visalakshi
Signature

RECOMMENDED AND SUBMITTED

Date : 18.1.2024

D. B. S.
Signature of the
Head of the Department

C.I. already availed of
..... days

ORDERS OF THE PRINCIPAL

NALLAMUTHU GOUNDER MAHALINGAM COLLEGE, POLLACHI

CASUAL LEAVE APPLICATION

Name : *Sivakanisundareswari - M*

Designation and Department : *Bsc / cs with DA*

Period of Leave : From *24 - 1 - 24*
To *24 - 1 - 24*

Number of days : *one day.*

Whether permission is required to
avail of the holidays preceding,
succeeding the period of leave :

Reasons for the leave : *Personal.*

Details of alternate arrangement of the work for the leave period are shown overleaf.

Date : *22 - 01 - 24*

M. J. 22/01/24
Signature

RECOMMENDED AND SUBMITTED

Date : *22-01-24*

forwarded
M *nm*
22/1

Vandi
Signature of the
Head of the Department

C.I. already availed of
..... days

[Signature]
ORDERS OF THE PRINCIPAL

NALLAMUTHU GOUNDER MAHALINGAM COLLEGE, POLLACHI

CASUAL LEAVE APPLICATION

Name

: V. Ruba.

Designation and Department

: Asst. Professor in Commerce [St]

Period of Leave

: From

02.02.2024

To

Number of days

: one day

Whether permission is required to avail of the holidays preceding, succeeding the period of leave

:

Reasons for the leave

: Fever

Details of alternate arrangement of the work for the leave period are shown overleaf.

Date: 02.02.2024


Signature

RECOMMENDED AND SUBMITTED

Date: 02.02.2024

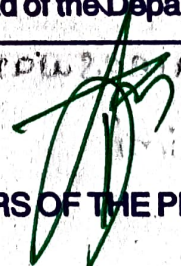
forwarded



Signature of the
Head of the Department

C.I. already availed of

..... days


ORDERS OF THE PRINCIPAL

NALLAMUTHU GOUNDER MAHALINGAM COLLEGE, POLLACHI

CASUAL LEAVE APPLICATION

Name : Dr. M. Nirmala.
Designation and Department : B.com (w) Assistant Professor
Period of Leave : From 08.02.2024.
To
Number of days : One day.
Whether permission is required to
avail of the holidays preceding,
succeeding the period of leave :
Reasons for the leave : Going to hospital.

Details of alternate arrangement of the work for the leave period are shown overleaf.

Date : 8/2/24


Signature

RECOMMENDED AND SUBMITTED

Date : 8/2/24

forwarded

M

nm
8/2


Signature of the
Head of the Department

C.I. already availed of
..... days


ORDERS OF THE PRINCIPAL

NALLAMUTHU GOUNDER MAHALINGAM COLLEGE, POLLACHI

CASUAL LEAVE APPLICATION

Name : Dr. B. Azhagusundari
Designation and Department : Associate professor, Bsc CS with
Period of Leave : From AD LML
To 13.02.2024
Number of days : 1
Whether the permission is required to
avail of the holidays preceding,
succeeding the period of leave :
Reasons for the leave : going to hospital

Details of the alternate arrangement of the work for the leave period are shown overleaf.

Date: 09.02.2024


Signature

RECOMMENDED AND SUBMITTED

Date: 09.02.2024

forwarded
11 - mm
9/2


Signature of the

Head of the Department

C.I. already availed of

1
..... days


ORDERS OF THE PRINCIPAL

12.02.2024
Pollachi.

From

V. Ruba
Assistant Professor
Department of Commerce [SF]
Nallamuthu Gounder Mahalingam College,
Pollachi.

To

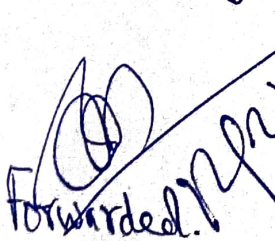
The Principal
Nallamuthu Gounder Mahalingam College
Pollachi.

Through
The Dean Academic
N.G.M College
Pollachi.

Respected Sir

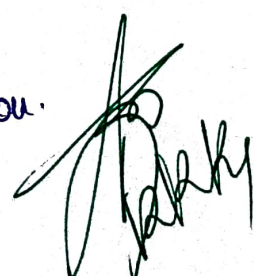
Sub: Requisition of Medical Leave - reg.

I have been diagnosed with fever and cold infection. As per Doctor's advice I was in leave from 06.02.2024 - 09.02.2024 [4 days]. Kindly consider my leave as Medical Leave. I have enclosed my Medical Certificate for your perusal.

Forwarded.  Thank You.

N. Bayyalaraj.
12/02/24.

(Associate Prof & Head)
Dept of Commerce - SF.


Your's Truly,
V. Ruba.
[Dept of Commerce]

12/02/24

MEDICAL CERTIFICATE

Signature of the Applicant

I, Dr. Malavi Satish after careful personal examination of the case hereby certify that Ruba.v. 322 whose signature is given above, is suffering from LRS that I consider that a period of absence from duty for four days with effect from 06/2/24 to 09/2/24 is absolutely necessary for the restoration of his/her health.

Station:

Meerut

Date :

07/2/24

C/o Civil Court
Meerut

Dr. Malavi
MEDICAL OFFICER

07/2/24

CERTIFICATE OF MEDICAL FITNESS

Signature of Applicant

I, Dr. Malavi Satish do hereby certify that I have carefully examined Sri./Smt. Ruba.v. 322 of the Dr. V. K. Menon who was suffering from LRS

and whose signature is given above, and find that he/she has recovered from his/her illness and is now fit to resume duties in Private Sector ~~Government~~ service. I also certify that before arriving at this decision I have examined the

original medical certificate(s) and statement(s) of the case (or certified copies thereof) on which leave was granted or extending, and have taken these in consideration in arriving at my decision.

Station:

Meerut

Date

09/02/24

Dr. Malavi
MEDICAL OFFICER

09/02/24

MEDICAL CERTIFICATE

Signature of Applicant

Gayathri

I, Dr. V. PREETHI MD DNB after careful personal examination
of the case hereby certify that Dr. /Shri /Smt. /Ms. E. GAYATHIRI (name
& designation of applicant) of the Office of the HR. TRAINER, APD DEPARTMENT, NGM COLLEGE, POLWACHI whose signature is
given above is suffering from VIRAL FEVER and, therefore, I
consider, that a period of absence from duty from 29-1-2024 to 2-2-2024 with
effect from 29-1-2024 (5 days) is absolutely necessary for the restoration of his/her health.

Place:

Coimbatore
29/1/2024

Signature of Government Medical Officer / Civil Surgeon /
Staff Surgeon / Authorized Medical Attendant / Registered
Medical Practitioner along with official seal

[Signature]

Dr. V. PREETHI M.D. (GEN. MED.), D.N.B. (GEN. MED.),
Reg No : 83405,
ASSISTANT PROFESSOR,
DEPT. OF GENERAL MEDICINE
COIMBATORE MEDICAL COLLEGE HOSPITAL

Date: Registration No. _____

Pollachi,
29-01-2024

From

E. Gayathiri
HR Trainer
APD Department
NGM college
Pollachi.

To

The principal
NGM college
Pollachi.

Sub: Requisition letter to take Medical
leave - reg

Respected Sir,

I am writing to request a medical
leave for 5 days from (29-01-2024 to
02/02/2024). I am feeling unwell and I
have been advised by doctor to take rest.
I am herewith attached medical
certificate for your reference.

Thanking you

forwarded

M - mb
1/2



Yours faithfully
E. Gayathiri

Pollachi,
23.1.2024.

From

Ms. K. S. Leelavathi,
Assistant Professor,
Department of Computer Technology,
NGM College, Pollachi.

To

The Principal,
NGM College,
Pollachi.

Through

The Dean Academic / Manager,
NGM College,
Pollachi.

Respected Sir

Sub: Requisition for Maternity Leave – reg.

This is for your kind information that I am requesting maternity leave from 1st February 2024. I kindly request you to grant me Maternity Leave for 6 months from 1st February 2024 to 31st July, 2024. I will return and join duty on August 1, 2024. I have attached the medical certificate for your kind reference. Please do the needful.

Thank you

K S Leelavathi
Yours sincerely,
(Ms. K. S. Leelavathi)

Forwarded
M. S. Leelavathi
23/1/24

Forwarded
M. S. Leelavathi
23/1/24

23/01/24

23/1/24



Thamarai Fertility and Women's Health Center

ISO 9001:2000 CERTIFIED

UNIT OF : THAMARAI MEDICAL FOUNDATION

Dr. C.V. Kannaki Uthraraj M.D., DGO.

Director

Reg. TN 32569

9/1/24

This is to certify that Mukelavally
is advised rest from 30/1/24
till delivery. She may be granted
leave on medical grounds.
Kannaki Uthraraj



**SIVA
MEDS**
MULTISPECIALITY HOSPITAL

Thamarai Fertility & Women's Health Center

@ # 1518, PKD Nagar, Avinashi Rd, Coimbatore - 641 004.

Phone : 0422 4214288, 98945 24788, 96297 74488

KOVAI MEDICAL CENTER AND HOSPITAL LTD.

@ P.B. No. 3209, Avinashi Road, Coimbatore - 641 014.

E-mail : kannakicv@yahoo.com | Phone : Dir : 91 - 422 - 2626999

Mobile : 91 99655 24788 (Appointment) ; 91 98422 24788 (Personal)

SIVA MEDS MULTISPECIALITY HOSPITAL

@ 146/2, Bharathi Street, Mahalingapuram, Pollachi - 642 002.

Phone : 91 - 4259 - 224498 ; Appointment : 94438 48199

E-mail : kannakicv@yahoo.com

Branches : Salem | Chennai | Tiruppur | Ooty

Web : www.thamaraihealthcare.com

Pollachi
8.1.2024

From
T. Muthukannu
Assistant Professor
Department of BIBA
NGM College

To
The Principal
NGM College
Pollachi.

Through
The Dean
NGM College
Pollachi

SUB: Requesting Medical Leave - Reg.
Respected Sir,

As I am suffering from severe Neck
Pain. so, I request you to kindly provide Medical
leave from 05.01.2024 to 09.01.2024. As
the needful.

Thanking you

Yours faithfully

T. Muthukannu

Forwarded
D. P. 8.1.2024
(1) (S. H. ARADENDAN)

Forwarded
M - Mrs
6/1.

for
S. T. 2024
for P. H. 01/24

Dr. S. AHAMED SHERIFF

M.B.B.S., D.Ortho, MS., Ortho

CONSULTANT ORTHOPAEDIC SURGEON

Reg. No. 66221

e-mail : sam.ahamed76@gmail.com

RAYYAN BONE CARE

Orthopedic Speciality Centre

10-1/1, Krishnasamy Lay-out

Palladam Road, Pollachi

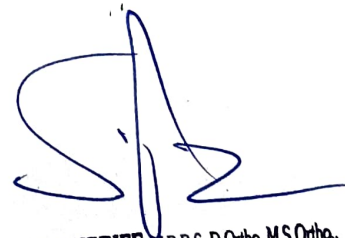
Cell : 94892 17954

Date.....04/01/2024

MEDICAL CERTIFICATE

This is to certify that Mrs. S. MUTHUKANNU
age 37 working as Asst professor in
BBA Department at NAM College Pollachi
is Suffering from Severe neck pain.
She is advised to take leave from
work for 4 days from 05.01.2024 to

09.01.2024



Dr. S. AHAMED SHERIFF, M.B.B.S., D.Ortho, M.S.Ortho,
Consultant Orthopedic Surgeon
Regd. No. 66221
10/1-1, Krishnasamy Layout,
Palladam Road, Pollachi - 642 002.

Pollachi

11.01.2024

From

T. Muthukanny
Assistant Professor
Department of BBA
NGM College

To

The Principal
NGM College
Pollachi.

Through

The Dean
NGM College
Pollachi.

SUB: Requisitioning to Rejoining - Reg.
Respected Sir
I am writing to inform you that I will be
returning to work at this esteemed institution
on 11.1.2024. I have on Medical leave due to
Neck pain from 5.1.2024 to 10.1.2024. I am now
fit to return the work.

Thanking you

Yours faithfully.

T. Muthukanny

Forwarded

D.R. 11.1.2024

For
11.1.2024
for Principal

Dr. S. AHAMED SHERIFF

M.B.B.S., D.Ortho, MS., Ortho

CONSULTANT ORTHOPAEDIC SURGEON

Reg. No. 66221

e-mail : sam.ahamed76@gmail.com

RAYYAN BONE CARE

Orthopedic Speciality Centre

10-1/1, Krishnasamy Lay-out

Palladam Road, Pollachi

Cell : 94892 17954

Date 09-01-2024

MEDICAL FITNESS CERTIFICATE

This is to certify that

S. Muthu kannu age 37/Female working
as Asst professor in BBA Department
at NIRM College of arts and science
Pollachi was suffering from
severe neck pain she would be
medically fit to resume her duty
from 11-01-2024.

Dr. S. AHAMED SHERIFF, M.B.B.S., D.Ortho, M.S. Ortho,
Consultant Orthopedic Surgeon
Regd. No. 66221
10/1-1, Krishnasamy Layout,
Palladam Road, Pollachi - 642 002.



Pollachi
08.01.2024

From

Gayathiri E
Department of Academy for Professional Development
NGM College
Pollachi

To

The Principal
NGM College
Pollachi

Through: Dean - Academic

Respected Sir

Sub: My Resignation – reg.

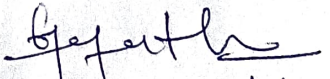
Due to my Health reasons, as per Doctor's advice, I need to undergo for the treatment. So that I am not able to continue my present job and its position. Kindly accept

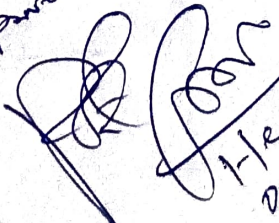
my resignation and relieve me as soon as possible. Please do the needful. Consider

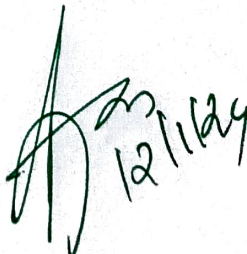
this letter as three months notice period from 8.1.24 to 8.4.24

Thanking you,

Yours faithfully,


(Gayathiri E) 8/1/2024

Approved

1-Head-APD
28/01/24


12/1/24


18/1/24

forwarded
M - 12/1/24

From:

M. Abinaya
Assistant Professor
Department of English Language
NGM College, Pollachi.

To :

The Principal
NGM College, Pollachi.

Through :

The Dean
NGM College, Pollachi



4/1/24

Respected Sir,

Sub - Resigning the duty reg.

I am writing this to you to inform that I
am diagnosed with Bilateral Pyelonephritis and I was
instructed by the doctor to take rest for one month
from 03.12.2023 to 03.01.2024. So I request you
to consider my absence as sick leave. Kindly accept it.

I am resuming my duty from today 04.01.2024.
document has been enclosed with this letter.

Thanking You

dt: 04.01.2024
at: Pollachi

Forwarded

Principal/4/1/24

Yes
Great
4/1/24

Yours truly,
M. Abinaya

VEL MULTI SPECIALITY HOSPITAL

Vel Nagar, 11, Gounder Itteri Road, PALANI-624 601.

CAL CERTIFICATE FOR LEAVE / EXTENSION or COMMUTATION OF LEAVE

I, Dr. K.S. VISHNU after careful examination of the case, do hereby certify
ABINAYA working as Assistant Professor in
VGM COLLEGE POLUACHI whose signature is given below, is / was
suffering from B/L PYLONEPHRITIS and I consider a period of absence in duty
31 days with effect from 3/12/23 to is / was absolutely
necessary for the restoration of his / her health.

3/1/24.

Dr.K.S.VISHNU, MBBS.,

Reg. No: 176531

VEL MULTI SPECIALITY HOSPITAL

11, Vel Nagar,

Gounder Itteri Road,

PALANI-624 601.

PO 74882.

Patient Ref No.

LTl or Signature of the patient

M. Aliya

(NAME OF THE M.O WITH REGN NO & SEAL)

From

Dr. S. Jagadambal,
Assistant Professor,
Department of Human Excellence,
NGM College
Pollachi.

To
The Principal,
NGM College,
Pollachi.

Through
The Academic Dean
NGM College
Pollachi.

Respected sir,

Subject: joining duty after medical leave regarding

I was in medical leave for my health issue from 14th to 24th November 2023. Now I have joined the college after the completion of my leave. Here with I have attached my fitness certificate for your kind perusal. I request you to do the necessary in this regard.

Thank You

Yours faithfully

Dr. S. Jagadambal

S. Jagadambal

Forwarded
mm
12/12

12/12/23



96983 63072

SKP CLINIC

Email : cpsn72@gmail.com

Dr.C.P. செந்தில்நாதன் M.B.B.S.,DCH,

(TNMC Regd. No. 62176)

நெல்லை லாலா ஸ்வீட்ஸ் அருகில்
பத்ரகாளியம்மன் கோவில் எதிரில்,
ஊத்துக்காடு ரோடு,

23/1, வெள்ளையம்மாள் லே-அவுட், RK நகர்,
பொள்ளாச்சி - 642 001.



Dr.C.P. Sendhil Nathan M.B.B.S.,DCH,

(TNMC Regd. No. 62176)

Near Nellai Lala sweets,
Bathrakaliamman Temple opposite
Uthukkadu Road,
23/1, Vellaiyammal layout, RK Nagar,
Pollachi - 642001.

Date : 20.11.23

MEDICAL OPINION

Dr. C.P. Sendhil Nathan, M.B.B.S., DCH.,
Asst. Surgeon & Pediatrician,
Government Hospital,
Tamil Nadu Medical Service.
20.11.23

Dr. C.P. SENDHIL NATHAN, M.B.B.S.,DCH.,
REG. NO: 62176
ASST. SURGEON & PEDIATRICIAN
GOVERNMENT HOSPITAL
TAMILNADU MEDICAL SERVICE

12/12

05/12/2023
Pollachi

From

Dr. Ahila.D
Assistant Professor
Department of Commerce
NGM College
Pollachi.

Through

The Head of the Department
Department of Commerce
NGM College
Pollachi.

The Dean-Academic
NGM College
Pollachi.

The Manager
NGM College
Pollachi.

1
5/12/23

To

The Principal
NGM College
Pollachi.

Respected Sir,

Subject: Request for Medical Leave

I am currently undergoing fertility treatment, and the process requires consistent medical appointments, monitoring, and rest. In light of this, I kindly request your approval for one-month medical leave from 01-12-2023 to 31-12-2023. I have also attached the medical certificate for the same.

Thank you.

Yours faithfully,

Ahila.D
(Dr.Ahila.D)

Forwarded
M - mhm
5/12

Forwarded.

N. Bogyalapp
(Associate Prof & Head)

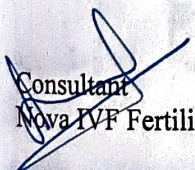
Dr. R.Meenakshi Priya
MS, DNB(OBG), MNAMS, FRM, DRM(Germany)
Reg No. : 89578

 **NOVA IVF**
FERTILITY

30.11.2023
Coimbatore

To whomsoever it may concern

This is to certify that Mrs. Ahila.D W/o Mr. Sivakumar.A aged 33 years /Female, The Couple is under IVF treatment at Nova IVF fertility Coimbatore. She is advised to take rest for 15 days from 01/12/2023 to 15/12/2023


Consultant
Nova IVF Fertility

Dr. R. MEENAKSHI PRIYA M.S.(O&G)DNB,FRM
REG.No: 89578
CONSULTANT
NOVA PULSE IVF CLINIC PVT.LTD.
LTL BUILDING DOOR No: 1334/3,1st & 4th FLOOR,
AVINASHI ROAD, PEELAMEDU,
COIMBATORE - 641 004.

Pulse IVF Clinic Private Limited

Building, Door No. 1334/3, First Floor, Avinashi Road, Peelamedu, Coimbatore, Tamilnadu - 641 004.
24011 300 | Toll-free no: 1800 103 2229 | E: info@novaivffertility.com | W: www.novaivffertility.com
Number: U74900KA2010PTC055474

From

Dr. P. Anitha
Assoc. Prof & Head
PG Dept, of Commerce (CA)
NAM College, Pollachi

To

The Principal
NAM College
Pollachi

 21/11/23

Through

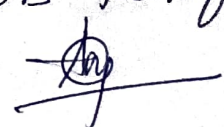
The Dean
NAM College, Pollachi

Respected Sir,

Sub: Requisition for Medical leave - reg

As I was suffering from severe cold & fever, I was unable to attend the college work for three days (15/11/23 to 17/11/23). In this regard, I kindly request you to permit me Medical leave for these three days.

Thank You

Yours Faithfully


PLACE: POLLACHI
DATE: 20/11/23.

Forwarded
M -  21/11

CERTIFICATE OF FITNESS TO RETURN DUTY

Signature of Applicant

I, Dr.T.SATISHKUMAR,M.B.B.S., Assistant Surgeon do hereby certify that I have carefully examined P.....Anitha....., Professor..... Commerce.....Dept.....NGIM college.....Pollachi.....and find that he / she recovered from his / her illness and is now fit to resume duties on18/11/2023.....I also certify before arriving at the decision, I examined the Original Medical Certificate and Statement of the case for certified copies there of on which leave was granted and have taken these in to consideration in arriving at my decision.

Station:



Date:

15/11/23
Dr. T. SATISHKUMAR, M.B.B.S.
ASSISTANT SURGEON
G.P.H.C. PERIYAPOTHU
REG. NO: 81214

Signature of the Medical Officer
Assistant surgeon / Registered
Medical Practitioner Regd.No.
Government Medical Officer

From

Dr.S.Niraimathi
Associate Professor & Head
Dept of CS with AI & ML
NGM College
Pollachi.

To

The Principal
NGM College
Pollachi.

Through

The Academic Dean
NGM College
Pollachi.

Respected Sir,

Sub: Request for Medical Leave (ML) regd..

This is for your consideration that I'm not feeling well. In this regard I request you to consider the same and avail me Medical leave (ML) from 18.11.2023 to 25.11.2023.

Thank You.

Yours' Sincerely

(Dr.S.Niraimathi)

Date: 15.11.2023

Place: Pollachi

forwarded
M - mms
16/11

College Dean

88

18/11/2023
19/11/2023
25/11/2023 } 3 days

16/11/23

MEDICAL CERTIFICATE FOR LEAVE / EXTENSION OF LEAVE

Signature of the Applicant :

[Signature]

I, Dr. P. Sharmila M.B.B.S M.S Assistant Surgeon/Medical Officer after

careful personal Examination of the case here by certified that

Thiru/Tmt/Selvi Dr. S. Viraimathi, ASSO. Prof &

Asst. Prof & Depy 2 CSC, NGM College, Pollach.

who signature is given

above in suffering from Viral fever, Arthralgia based on clinical and

investigation don as is given below and I consider that a period of absence from

duty for 8 days

18.11.2023 to 25.11.2023

with effect from to is absolutely necessary for the

restration of his/her health.

Station.....Pollach.....

Date.....16.11.2023.....

[Signature]

Signature of the Medical Officer

Assistant Surgeon / Registered

Medical Practitioner Regd No. 601883

[Red Stamp]
16/11

[Red Stamp]
14/11/23

Pollachi

4.11.23.

From,

Dr. Umamaheswari.D
Asst. Professor
BCA Department
NGM College, Pollachi.

To,

The Principal
NGM College
Pollachi.

Thru,

The Respected Deans
NGM College
Pollachi.

Respected Sir,

Sub: Requisition of Medical Leave - Reg.

As I fell down and my leg has been
sprained, the Doctor advised to take complete rest.

I request your goodness to accept my request and
consider my absence as Medical leave from the
Period of 6.11.23 to 10.11.23.

Forwarded

Handed
4/11/23

Pending to
Medical Officer
Thank you
Amal
6/11/23

Yours faithfully
Umamaheswari.D

14/11/23

MEDICAL CERTIFICATE FOR LEAVE OR EXTENSION OF LEAVE

Signature of Applicant X Chinnah. D

I, Dr. A. Raja D.Ortho, DNB(Ortho) after careful personal examination of the case do hereby

certify that Dr. D. Manoheswari - Assistant

Professor who is suffering from

Acute I see Enin @ low and I consider that a period

of absence from His / Her duty for five days - (5) days with effect from

06.11.23 to 10.11.23 is absolutely necessary for restoration

TATION: Pollachi

ATE: 10/11/23

Dr. A. RAJA, MBBS., D.Ortho., DNB (Ortho),
Reg. No : 75388
Orthopaedic Trauma and Joint Replacement Surgeon
Sindhia Ortho Clinic
54, L.I.G. Colony, M.L. Puram,
POLLACHI - 642 002.

SIGNATURE