

CADET LEAVE/OUT PASS FORM

To,
The Principal
CMKP U P Sainik School
Lucknow

From,
School No. and House:Class:.....
Cdt's Name :
Name of Guardian:
Relation to Cdt :
Mob No. of Guardian:

Sir,
With due regards I have to request that my ward may be granted leave/out pass for _____ day/days from _____ (Date &time) to _____ (Date &time) both days inclusive for reason as mentioned below :-

.....
.....

It is also requested that my ward may please be allowed to go with.....
(Name & Relation of the person to take away the cadet)

OR

As nobody is available in my family to pick my ward from school, kindly allow him/her to go alone. I take full responsibility of the same.

Safe arrival of the ward will be duly intimated to the school authorities through mail/WhatsApp.
Yours faithfully

Dated: - _____ (Signature of Applicant)

REMARKS/RECOMMENDATION OF

House Matron

House Master

Class Teacher

Name: _____

Name: _____

Name: _____

Signature _____

Signature _____

Signature _____

Date: _____

Date: _____

Date: _____

I/C TRG

PRINCIPAL

RECEIPT

Leave/out pass has been granted to Cdt _____

School No. House _____ Class _____ from _____ to _____

Date: _____

House Master/Matron