

VJTI

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JOINING REPORT-REGULAR FACULTY (To be submitted after availing of Long Leave)

Date: To, The Director, Veermata Jijabai Technological Institute Matunga, Mumbai – 400019 leave from ______ to _____. Sir, I have availed of _ (specify type) I request you to grant me the permission to join on Duty as _____ Department from Enclosed herewith the necessary certificates. Yours faithfully Signature: Name Address: This faculty is permitted to join. Head of the Department Recommended for permission. Dean Faculty Permitted to join. Director