

**PAKISTAN INSTITUTE OF FASHION AND DESIGN, LAHORE
GATE PASS AND SHORT/HALF DAY LEAVE FORM**

Date: _____

Please Tick Appropriate Box:

OFFICIAL		PERSONAL	
-----------------	--	-----------------	--

Name: _____

Designation: _____ Department _____

Duration: From _____ To _____ Total (_____ Hrs _____ Min)

Reason: _____

Applicant Head of Department Superintendent Registrar

**PAKISTAN INSTITUTE OF FASHION AND DESIGN, LAHORE
GATE PASS AND SHORT/HALF DAY LEAVE FORM**

Date: _____

Please Tick Appropriate Box:

OFFICIAL		PERSONAL	
-----------------	--	-----------------	--

Name: _____

Designation: _____ Department _____

Duration: From _____ To _____ Total (_____ Hrs _____ Min)

Reason: _____

Applicant Head of Department Superintendent Registrar