		Date:	
To,	The Principal, Satyawati College (Evening Ashok Vihar Phase-III, Delhi – 110052	g),	
Sub:	Prior permission for attending the office on Holiday(s)/Sunday(s)		
Sir,			
The f	ollowing employee(s) may b	e attending the office on	1 to
and th	permission may be accorded ne employee(s) will be paid I oned against each:		
Sl. No.	Name & Designation	Compensatory / Honorarium	Signature of the employee
1			
2			
3			
4			
5			
6			
7			
Thank	ting you,		Yours faithfully
TO BE A STATE OF	Approve	ed / Not-Approved	

PRINCIPAL