



**SAKET GYANPEETH'S
PRAMOD RAM UJAGAR TIWARI SAKET
INSTITUTE OF MANAGEMENT**

Saket Vidyanagari Marg, Katemanivali, Kalyan East 421306.

APPLICATION FOR LEAVE TEACHING

1. Name of Applicant Dr. Prashant Mishra
2. Post held Asst. Professor Dept. Management
3. Nature of Leave OD (Study leave)
4. Period of leave & Date on/From 18.06.24 to 18.06.24 total 01
5. Grounds on which leave is applied for NET Exam
6. Whether relevant Certificate attached Yes
7. Sunday & Holidays Proposed to be -
Prefixed/suffixed to leave

Leave Details	Total Leave	Availed Leave	Balance Leave
Casual Leave	-	-	-
Earned Leave	-	-	-
Medical Leave	-	-	-
Vacation Leave	-	-	-
Com Off	-	-	-
<u>Study leave</u>	-	<u>01</u>	-

S. S. Jain

(Academic Dean)

Prashant Mishra

(Signature of Applicant)

Date 15.06.24

(FOR OFFICE USE ONLY)

Leave at the credit of applicant: _____

Remark of Office: _____




Date 15.06.2024



Saket
Director (In-Charge)
Pramod Ram Ujagar Tiwari
Saket Institute of Management
Saket Vidya Nagari Marg,
Chinchpada Road, Kalyan East
Director



UGC – NET June 2024 Admit Card

Roll Number:	3110055671	Application Number:	240510046780
Candidate's Name:	Prashant Gaurishankar Mishra	Father's Name:	GAURISHANKAR
Gender:	Male	Date of Birth:	19-07-1989
Person with Disability (PwD):	No	Scribe required*:	NA
<p>*Subject to the conditions stipulated in the Guidelines dated 29.08.2018 for conducting written examination for Persons with Benchmark Disabilities (as amended from time to time), scribe shall be given, if so desired by a person with benchmark disabilities in the category of blindness, locomotor disability (both arm affected BA) and cerebral palsy. #All the candidates with benchmark disability not availing the facility of scribe will be allowed compensatory/extra time of 20 minutes per hour of the examination.</p>			
 3110055671		Candidate's Signature 	
Test Details			
Applied For	Assistant Professor, Ph.D. Only		
NET Subject	Management (including Business Admn. Mgt./Marketing / Marketing Mgt. / Indu		
Date of Examination	18.06.2024		
Shift	Shift-2		
Reporting / Entry Time at Centre	01.00PM (IST)		
Gate Closing Time of Centre	02.30PM Sharp (IST)		
Timing of Test	03.00PM to 06.00PM (IST)		
Test Centre No.	311005		
Name of Test Centre	RAMRAO ADIK INSTITUTE OF TECHNOLOGY		
Address of Test Centre	RAMRAO ADIK INSTITUTE OF TECHNOLOGY, D Y PATIL DEEMED TO BE UNIVERSITY, SECTOR-07, NERUL, NAVI MUMBAI - 400706		
City of Test Centre	MUMBAI/NAVI MUMBAI		
State of Test Centre	MAHARASHTRA		
 Director (Exams), NTA			

Note:

- The candidate must reach the Centre at the time as indicated against Reporting/Entry time at the Centre, in the Admit Card.
- The candidate should ensure that the Question Paper is as per his/her opted subject indicated in the Admit Card. In case the subject of the Question Paper is other than his/her opted subject, the same may be brought to the notice of the Invigilator concerned.
- No Candidate should adopt any unfair means or indulge in any unfair examination practices. If any candidate is found indulging in any unfair means/unfair examination practices at any stage of examination, his/her candidature will be cancelled, and legal action will be taken including debarring in all future examinations conducted by NTA.
- No candidate shall be permitted to enter after the Gate Closing Time.
- No candidate shall be permitted to leave the Examination Room/ Hall before the end of the examination.

SELF DECLARATION (UNDERTAKING)

I, _____, resident of _____, do hereby, declare the following:

- I have read the instructions, Guidelines. I have read Information Bulletin, Instructions, and Notices related to this examination available on the website ugcnet.nta.ac.in and www.nta.ac.in.
- I have read the detailed "IMPORTANT INSTRUCTIONS for CANDIDATES" as given on Page – 2 and I undertake to abide by the same.




 Director (In-Charge)
 Pramod Ram Ujagar Tiwari
 Saket Institute of Management
 Saket Vidya Nagari Marg,
 Chinchpada Road, Kalyan (E) 421 306



**SAKET GYANPEETH'S
PRAMOD RAM UJAGAR TIWARI SAKET
INSTITUTE OF MANAGEMENT**

Saket Vidyanagari Marg, Katemanivali, Kalyan East 421306.

APPLICATION FOR LEAVE TEACHING

1. Name of Applicant Dr. Shaikesh Poojari
2. Post held Dean Dept. MMS
3. Nature of Leave Vacation
4. Period of leave & Date on/From 02/05/2024 to 08/05/2024 total 7 days
5. Grounds on which leave is applied for N/A
6. Whether relevant Certificate attached N/A
7. Sunday & Holidays Proposed to be -
Prefixed/suffixed to leave

Leave Details	Total Leave	Availed Leave	Balance Leave
Casual Leave	-	-	-
Earned Leave	-	-	-
Medical Leave	-	-	-
Vacation Leave	15	07	08
Com Off	-	-	-

N/A
(Academic Dean)

S. Shaikesh Poojari
(Signature of Applicant)

Date 22/04/2024

(FOR OFFICE USE ONLY)

Leave at the credit of applicant: _____

Remark of Office: Vacation Leave - 7

Date 22/04/2024



[Signature]
Director (in-charge)
Pramod Ram Ujagar Tiwari
Saket Institute of Management
Saket Vidya Nagari Marg,
Chinchpada Road, Kalyan (E) 421 306

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SAKET GYANPEETH'S
PRAMOD RAM UJAGAR TIWARI
SAKET INSTITUTE OF MANAGEMENT
 Saket Vidyanagari Marg, Katemanivali, Kalyan East 421306.

APPLICATION FOR LEAVE TEACHING

1. Name of Applicant Shraddha Daftardar
2. Post held Assistant Professor Dept. MBA
3. Nature of Leave Medical leave
4. Period of leave & Date on/From 11-03-2024 to 13-03-2024 total 3
5. Grounds on which leave is applied for -
6. Whether relevant Certificate attached -
7. Sunday & Holidays Proposed to be -
 Prefixed/suffixed to leave

Leave Details	Total Leave	Availed Leave	Balance Leave
Casual Leave	-	-	-
Earned Leave	-	-	-
Medical Leave	-	03	-
Vacation Leave	-	-	-
Com Off	-	-	-

S. S. Daftardar
 (Academic Dean)

Shraddha Daftardar
 (Signature of Applicant)

Date 15/03/2024

(FOR OFFICE USE ONLY)

Leave at the credit of applicant: _____

Remark of Office: _____

Date 15/03/2024



Pr. Ram Ujagar Tiwari
 Director (In Charge)
Pramod Ram Ujagar Tiwari
Saket Institute of Management
 Saket Vidya Nagari Marg,
 Chinchpada Road, Kalyan (E) 421 306

DR. A. B. DHOK

B.A.M.S. (Bom)

R. N. I. 9902 A

Rajaji Path, Dombivli (East), Phone : 2451016

DR. (MRS.) MAYA A. DHOK

B.A.M.S. (Bom)

R.H.I. 17447 AI

Date : 11/3/2024

THIS IS TO CERTIFY THAT

Shri / Smt. MM Shroddha Dattodkar

under my treatment from 11/3/24 to _____

He / She is / was suffering from Viral Flu

and is / was advised to take rest for a period of 3 to 4 days

from 11/3/24 to 12/3/24

He / She is / was in my opinion,

fit to resume his / her duties / school / College from _____







Director (In-Charge)
Pramod Ram Ujagar Tiwari
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SAKET GYANPEETH'S
**PRAMOD RAM UJAGAR TIWARI SAKET
INSTITUTE OF MANAGEMENT**

Saket Vidyanagari Marg, Katemanivali, Kalyan East 421306.

APPLICATION FOR LEAVE TEACHING

1. Name of Applicant Dr. Shikesh Poojari
2. Post held Dean Dept. MMS
3. Nature of Leave Com off (15/11/23, 11/11/23, 19/11/23)
4. Period of leave & Date on/From 12/02/2024 to 14/02/2024 total 3
5. Grounds on which leave is applied for —
6. Whether relevant Certificate attached —
7. Sunday & Holidays Proposed to be —
Prefixed/suffixed to leave

Leave Details	Total Leave	Availed Leave	Balance Leave
Casual Leave	—	—	—
Earned Leave	—	—	—
Medical Leave	—	—	—
Vacation Leave	—	—	—
Com Off	05	03	02

N/A
(Academic Dean)

SS Poojari
(Signature of Applicant)

Date - 10/02/2024

(FOR OFFICE USE ONLY)

Leave at the credit of applicant: -----

Remark of Office: OK

Date - 10/02/2024



[Signature]
Director
Director (In-Charge)
Pramod Ram Ujagar Tiwari
Saket Institute of Management
Saket Vidya Nagari Marg,
Chinchpada Road, Kalyan (E) 421 306



SAKET GYANPEETH'S
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SAKET INSTITUTE OF MANAGEMENT
Saket Vidyanagari Marg, Katemanivali, Kalyan East 421306.

APPLICATION FOR LEAVE TEACHING

1. Name of Applicant Diana Anthony Fernandes
2. Post held Assistant Professor Dept. MMS
3. Nature of Leave CL-2
4. Period of leave & Date on/From 06/02/24 to 07/02/24 total 02
5. Grounds on which leave is applied for _____
6. Whether relevant Certificate attached _____
7. Sunday & Holidays Proposed to be _____
Prefixed/suffixed to leave _____

Leave Details	Total Leave	Availed Leave	Balance Leave
Casual Leave		02	
Earned Leave	-	-	-
Medical Leave	-	-	-
Vacation Leave	-	-	-
Com Off	-	-	-

S. Rajan

(Academic Dean)

Fernandes

(Signature of Applicant)

Date 08/02/24

(FOR OFFICE USE ONLY)

Leave at the credit of applicant: _____

Remark of Office: _____

Date 08/02/24



Pramod Ram Ujagar Tiwari

Director (In-Charge)
Pramod Ram Ujagar Tiwari
Saket Institute of Management
Saket Vidyanagari Marg,
Chinchpada Road, Kalyan East 421306


**PRAMOD RAM UJAGAR TIWARI SAKET
INSTITUTE OF MANAGEMENT**

Saket Vidyanagari Marg, Chinchpada Road, Katemanivali, Kalyan [E].

APPLICATION FOR LEAVE NON-TEACHING

1. Name of Applicant TRUPTI BHOSLE
2. Post held ADMIN ASST Dept. MANAGEMENT
3. Nature of Leave MEDICAL C'
4. Period of leave & Date on/From 12/7/23 to 16/7/23 total 04 days
5. Grounds on which leave is applied for INJURY TO HEAD
6. Whether relevant Certificate attached YES
7. Sunday & Holidays Proposed to be -
Prefixed/suffixed to leave

Leave Details	Total Leave	Availed Leave	Balance Leave
Casual Leave	10	00	10
Medical Leave	10	04	06
Earned Leave	00	00	00
Com Off	00	00	00


Mr. Ganesh Parab
(Admin Head)


(Signature of Applicant)

Date 17/7/23

(FOR OFFICE USE ONLY)

Leave at the credit of applicant: _____

Remark of Office: OK

Date 21/7/23




Director

Director (In-Charge)
Pramod Ram Ujagar Tiwari
Saket Institute of Management
Saket Vidya Nagari Marg,
Chinchpada Road, Kalyan (E) 421 306

Shree Krishna Clinic

Dr. Meenakshi
M.B.B.S. PGDMLS



Add.: A-1, Sarvodaya Pooja, Barave Road, Khadakpada, Kalyan (W), Mobile: 9930067366

Timing: Morn. 10.30 to 1.30 Evening - 07.00 to 9.30 (Sunday Closed)

Name: Mrs. Trupti Bhesale

Date: 15/07/23

Age: 45 yrs

Sex: M/F

This is to certify that Mrs. Trupti Bhesale was under my treatment from 12/07/23 to 15/07/23 due to Injury to head while working at home. She is medically fit to go to duty from 16/07/23.

Dr. Meenakshi D. Patil

Dr. MEENAKSHI D. PATIL
M.B.B.S. PGDMLS
Reg. No. 2001/02/1674

Pramod Ram Ujagar Tiwari

Director (In-Charge)
Pramod Ram Ujagar Tiwari
Saket Institute of Management
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**PRAMOD RAM UJAGAR TIWARI SAKET
INSTITUTE OF MANAGEMENT**

Saket Vidyanagari Marg, Katemanivali, Kalyan East 421306.

APPLICATION FOR LEAVE NON-TEACHING

1. Name of Applicant SHRUTI ANIL MORE
2. Post held Admin Assistant Dept. Management
3. Nature of Leave personal leave
4. Period of leave & Date on/From 19/03/2024 to 19/03/2024 total 01
5. Grounds on which leave is applied for -----
6. Whether relevant Certificate attached -----
7. Sunday & Holidays Proposed to be -----
Prefixed/suffixed to leave

Leave Details	Total Leave	Availed Leave	Balance Leave
Casual Leave	-	01	-
Earned Leave	-	-	-
Medical Leave	-	-	-
Com Off	-	-	-

[Signature]
(Admin Head)

[Signature]
(Signature of Applicant)

Date - 18/03/2024

(FOR OFFICE USE ONLY)

Leave at the credit of applicant: -----

Remark of Office: OK

Date - 18/03/2024



[Signature]
Director

Director (In-Charge)
Pramod Ram Ujagar Tiwari
Saket Institute of Management
Saket Vidya Nagari Marg,
Chinchpada Road, Kalyan (E) 421 306