

Baba Banda Singh Bahadur Engg. College

Fatehgarh Sahib

PERFORMA FOR ADJUSTMENT OF CLASSES

Name of the teacher on leave.....Deptt.....

Leave from.....to.....for.....days.

Signature

Adjustment Details :-

Sr. No.	Date	Period	Room Lab.	Class	Name of the Substitute Teacher	Signature
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						