



SRI INDU INSTITUTE OF PHARMACY

Sponsored by New Loyola Model Educational Society, Vanasthalipuram, Hyderabad.

(Approved by PCI – New Delhi, Affiliated to JNTUH- Hyderabad.)

Sheriguda, Ibrahimpatnam, R.R. Dist -501 510, Hyderabad, Telangana State.

Phone : 9391537555 Website : www.siip.ac.in Email ID : siipoffice@siip.ac.in

6.3.1. Welfare measures to employees - both Teaching and Nonteaching:

Enclosed:

- 1. Group Life Insurance Policy**
- 2. Bus facilities**
- 3. Maternity Leaves Sanctioned**
- 4. Staff Leaves Sanctioned**



WITH YOU ALWAYS



38322078325

733452

Group Personal Accident And Business Travel Accident Policy

Schedule of Insurance

Agent/Broker Name - BHARANIDHARAN N
Agent/Broker License Code - 1282480
Agent/Broker Contact No -9848030468(mobile or landline)

Policy Number: 0238426167
Renewal: 01
Endorsement: 00
Policyholder Name: SRI INDU INSTITUTE OF PHARMACY
Address: SHERIGUDA, IBRAHIMPATNAM, R.R. DIST,
HYDERABAD
RANGAREDDY - 501510
K.V.RANGAREDDY
TELANGANA
INDIA
Place of supply -TELANGANA
State code -36

Contact number :
Insurance Period :- **Effective Date** 09/04/2021 **Expiry Date** 08/04/2022
(Beginning at 12:01 AM and ending at Midnight of the expiry date)

Business Description: Service Industry
Beneficiary : As designated by each insured person on file with the Company

Eligible Persons 36 (Classification of Insured)

The following persons shall be eligible for Insurance hereunder :

Age group : From 18 To 65 Years ()

Hazards : 24-Hour Protection


Sr No	Description of Insured Persons / Category / Designation	No. per category
1	Category 1	36

A. M. S.
PRINCIPAL

Sri Indu Institute of Pharmacy
SHERIGUDA, Ibrahimpatnam
R. R. DIST-501 508.





Total No. of Employees / Members Covered :- 36	
Policy Comment:- Only Permanent Employees of the company are covered	
AGGREGATE LIMIT :- (PER ACCIDENT) Rs 2,700,000.00 This Policy will only be in force if the schedule is signed by a person We have authorised	
Provisional Premium (Rs)*	
UGST/SGST @9 % (₹)	4,118.76
CGST @9 % (₹)	370.69
Total Premium (Rs)	370.69
	4,860.00
GSTIN : 36AABCT3518Q1ZX - TELANGANA Service Accounting Code : 99713333	
* Subject to final reconciliation at the end of the policy period.	
The stamp duty of ₹ 15.00/- paid in cash or demand draft or by pay order, vide Receipt/Challan no: CSD/291/2021/1192 dated the 20/04/2021	
Producer Code	0008397000
Producer Name	BHARANIDHARAN N
Producing Office	HYDERABAD
Issued at	HYDERABAD
Issued Date	20/04/2021
	For TATA-AIG General Insurance Company Limited
	
	Authorized Signatory

A. M. S.
PRINCIPAL
Sri Indu Institute of Pharmacy
SERIGUDA, Ibrahimpatnam Mo
M. R. DIST-501 508.





Policy Number: 0238426167 01 00

Schedule of Benefits & Principal Sum Insured per Person for all Classes:										
Sr No	Category/Designation	Name	No. of Persons	Avg / Fixed Sum Insured (₹) - Maximum Upto						
				AD Only	DM Only	PTD Only	PPD Only	Weekly	Acc.Hosp.Cash	Per Mille Rate
1	Category_1	As Per Annexure	36	300,000.000	300,000.000	300,000.000	300,000.000	0.000	0.00	0.38138

AD - Accidental Death, DM - Dismemberment, PTD - Permanent Total Disability, PPD - Permanent Partial Disability, AME - Accident Medical Expenses
 Weekly - No. of Weeks - Hospital Cash - No. of days -

Category	No of weeks for TTD
Category_1	

Total Capital Sum Insured ₹ 10,800,000.00

- * Calculation for per Mille Rate (Post Tax) = Annual premium/ Sum Insured (employee) x 1000
- Calculation for Endorsement premium / person = per mille rate/1000 * Sum insured * ((Expiry date - Endorsement Effective Date) + 1),
- Please note that the endorsement is booked subject to availability of the buffer amount & the endorsement per person premium may vary due to capping on Weekly Indemnity or Accident Medical Expenses or Sum Insured

Applicable to all categories mentioned above

Medex Exception		- Fixed. IPD up to Rs 5,000 or actual whichever is less subject to 24 Hrs. hospitalization
S.N.	MedEx	Sum Insured
1	Fixed MedEx - IPD	Category_1 INR 5000
Terrorism		- COVERED
24-Hour Protection		- COVERED

Policy Number: 0238426167 01 00

Policy Type: Named Policy

Other Exception:

A. M. S.
PRINCIPAL
 Sri Indu Institute of Pharmacy
ZERIGUDA, Ibrahimpatnam
G. B. DIST-601 608.





Attached to and forming part of Policy No 0238426167 01 00

List of Insured Annexure "A"

Sr. No.	Emp Id	Name of Insured	Category	Tata AIG Ref No	Sum Insured (₹)					
					AD	DM	PTD	PPD	TTD (Weekly)	Acc Medex
1	SIIP1	Dr Mohathasim Billah A	Category_1	ORIG0001	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
2	SIIP2	Dr A Sambasiva Rao	Category_1	ORIG0002	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
3	SSIP3	Dr D Varun	Category_1	ORIG0003	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
4	SIIP3	Dr S M Sathesh	Category_1	ORIG0004	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
5	SIIP4	Dr Perli Kranti Kumar	Category_1	ORIG0005	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
6	SSIP4	Md Jaffer Sadik	Category_1	ORIG0006	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
7	SIIP5	T Naga Aparna	Category_1	ORIG0007	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
8	SIIP6	G Veena	Category_1	ORIG0008	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
9	SSIP5	K Hemanth	Category_1	ORIG0009	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
10	SIIP7	N VijayaRekha	Category_1	ORIG0010	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
11	SIIP8	B Nagaveni	Category_1	ORIG0011	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
12	SSIP6	P Raju	Category_1	ORIG0012	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
13	SIIP9	P Venkatesh	Category_1	ORIG0013	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
14	SIIP10	R Suneetha	Category_1	ORIG0014	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
15	SSIP7	Dr Rohit kumar	Category_1	ORIG0015	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
16	SIIP11	A kesava	Category_1	ORIG0016	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
17	SIIP12	Dr D Naga Latha	Category_1	ORIG0017	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
18	SSIP8	M S N Sandhya	Category_1	ORIG0018	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
19	SIIP13	Dr T Pavitra	Category_1	ORIG0019	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
20	SIIP14	G Suresh Kumar	Category_1	ORIG0020	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
21	SSIP9	G Anusha	Category_1	ORIG0021	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
22	SIIP15	B Mamatha	Category_1	ORIG0022	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
23	SIIP16	K Janaki	Category_1	ORIG0023	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
24	SSIP10	U Ashiwini	Category_1	ORIG0024	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
25	SIIP17	G Praveen	Category_1	ORIG0025	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
26	SIIP18	P Deepika	Category_1	ORIG0026	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
27	SSIP11	V Gopinadh	Category_1	ORIG0027	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
28	SIIP19	L CHANDRA SEK HAR	Category_1	ORIG0028	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
29	SIIP20	E SANTHOSH KUMAR	Category_1	ORIG0029	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
30	SSIP12	P SRI LATHA	Category_1	ORIG0030	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
31	SIIP21	B VEERAMALLAPPA	Category_1	ORIG0031	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
32	SIIP22	P VINAY KUMAR	Category_1	ORIG0032	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
33	SSIP13	G NARESH	Category_1	ORIG0033	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
34	SIIP23	U KISHAN	Category_1	ORIG0034	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
35	SIIP24	N PRIYANKA	Category_1	ORIG0035	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00
36	SSIP14	S RADHIKA	Category_1	ORIG0036	300,000.00	300,000.00	300,000.00	300,000.00	0.00	5,000.00

A. M. S.
PRINCIPAL
 Sri Indu Institute of Pharmacy,
 PERIGUDA, Ibrahimpatnam M.
 R. B. DIST-501 508.



POS PAN No:

POS Aadhar No:

Insurance is the subject matter of the solicitation. For more details on risk factors, terms and conditions, please read sales brochure carefully before concluding a sale.



RECEIPT

Receipt No. : 106001020370602

Receipt Date : 20/04/2021

Policy No : 0238426167 01 00

Received with thanks from SRI INDU INSTITUTE OF PHARMACY a sum of ₹ 4,860.00 (Rupees Four Thousand Eight Hundred Sixty And Paise Zero Only)

Sr. No.	Policy Number	Total Premium (₹)	Utilized from the receipt for policy (₹)	Balance (₹)
1	0238426167 01 00	4,860.00	4,860.00	4,860.00

Note:

1. This is a computer generated receipt and does not require a signature.
2. Upon issuance of this Receipt, all previously issued temporary receipts, if any, related to this Policy shall be considered null and void.
3. Amounts received by cheque shall be subject to realisation.
4. Any amount received in excess of the Premium is being/shall be refunded by the Company.

GSTIN : 36AABCT3518Q1ZX - TELANGANA Service Accounting Code : 99713333

Insurance is the subject matter of the solicitation. For more details on risk factors, terms and conditions, please read sales brochure carefully before concluding a sale.
TATA AIG General Insurance Company Ltd. Regd. Office: 15th floor, Tower A, Peninsula Business Park, Ganpatrao Kadam Marg, Off Senapati Bapat Marg, Lower Parel, Mumbai 400 013.

IRDA Registration No.108, CIN No : U85110MH2000PLC128425, PAN :
Website: www.tataaig.com 24X7 Tollfree Helpline 1800-266-7780 E-mail: customersupport@tataaig.com

A. M. S.
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Sri Indu Institute of Pharmacy
SERIGUDA, Ibrahimpatnam
B. R. DIST-501 505.



POS PAN No:

POS Aadhar No:

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TATA AIG General Insurance Company Ltd. Regd. Office: 15th floor, Tower A, Peninsula Business Park, Ganpatrao Kadam Marg, Off Senapati Bapat Ma
IRDA Registration No.108, CIN No:U85110MH2000PLC128425, PAN:AABCT3518Q, UIN No:TATHLIP21195V027021



38322078336

Group Personal Accident And Business Travel Accident Policy

Schedule of Insurance

Agent Broker Name - BHARANIDHARAN N

Agent Broker License Code - 1282480

Agent Broker Contact No -9848030468(mobile or landline)

Policy Number: 0238426171
 Renewal: 01
 Endorsement: 00
 Policyholder Name: SRI INDU INSTITUTE OF PHARMACY
 Address: SHERIGUDA, IBRAHIMPATNAM, R.R. DIST,
 HYDERABAD
 RANGAREDDY - 501510
 K.V.RANGAREDDY
 TELANGANA
 INDIA
 Place of supply -TELANGANA
 State code -36

Contact number :

Insurance Period :-

Effective Date 09/04/2021 Expiry Date 08/04/2022
 (Beginning at 12:01 AM and ending at Midnight of the expiry date)

Business Description:

Educational Institutes

Beneficiary :

As designated by each insured person on file with the Company

Eligible Persons 100 (Classification of Insured)

The following persons shall be eligible for Insurance hereunder :

Age group : From 3 To 65 Years ()

Hazards : 24-Hour Protection

Sr No	Description of Insured Persons / Category / Designation	No. per category
1	Category 1	100

A. M. S.
PRINCIPAL
 Sri Indu Institute of Pharmacy
 SHERIGUDA, Ibrahimpatnam M.
 R. R. DIST-501 508



POS PAN No:

POS Aadhar No:

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TATA AIG General Insurance Company Ltd. Head Office: 15th floor, Tower A, Peninsula Business Park, Connaught Place, New Delhi - 110022



Attached to and forming part of Policy No 0238426171 01 00

List of Insured Annexure "A"

Sr. No.	Emp Id	Name of Insured	Category	Tata AIG Ref No	Sum Insured (₹)					
					AD	DM	PTD	PPD	TTD (Weekly)	Acc Medex
1	20T01R0001	ABHILASH REDDY KOTHA	Category_1	ORIG0001	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
2	20T01R0002	ABHINAYA VOIKAJI	Category_1	ORIG0002	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
3	20T01R0003	AKARSHA POLURI	Category_1	ORIG0003	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
4	20T01R0004	AKHILA MAJLARAM	Category_1	ORIG0004	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
5	20T01R0005	AKSHARA GUGULOTH	Category_1	ORIG0005	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
6	20T01R0006	AMERESH K	Category_1	ORIG0006	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
7	20T01R0007	ANIL BAVAJI	Category_1	ORIG0007	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
8	20T01R0008	ANIL KUMAR RAMAVATH	Category_1	ORIG0008	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
9	20T01R0009	AKSHITHA VADLAKONDA	Category_1	ORIG0009	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
10	20T01R0010	ANJALI RAVULAPALLY	Category_1	ORIG0010	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
11	20T01R0011	ARJUN KUMAR VODDIRAJ	Category_1	ORIG0011	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
12	20T01R0012	BHAGYA SRI BOODS	Category_1	ORIG0012	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
13	20T01R0013	BHARATH SIMHA REDDY BANDA	Category_1	ORIG0013	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
14	20T01R0014	CATHRIN PRAGATHI M	Category_1	ORIG0014	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
15	20T01R0015	CHANDRA MEGAVATH	Category_1	ORIG0015	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
16	20T01R0016	CHARITHA A	Category_1	ORIG0016	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
17	20T01R0017	CHARAN TEJ CHAKRAPANI	Category_1	ORIG0017	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
18	20T01R0018	DEEKSHITH GADDAM	Category_1	ORIG0018	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
19	20T01R0019	DHANALAKSHMI POTHAGONI	Category_1	ORIG0019	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
20	20T01R0020	DINESH KUMAR SABBARIGARI	Category_1	ORIG0020	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
21	20T01R0021	DAS DINESH CHARY NARAYANA	Category_1	ORIG0021	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
22	20T01R0022	DEEKSHITHA MANKALA	Category_1	ORIG0022	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
23	20T01R0023	DIVYA REDDY VAJJA	Category_1	ORIG0023	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
24	20T01R0024	GAYATHRI SANGEPU	Category_1	ORIG0024	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
25	20T01R0025	HASRATH KHAN	Category_1	ORIG0025	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
26	20T01R0026	H R ANUNAY SAI RAJ	Category_1	ORIG0026	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
27	20T01R0027	KALYANI KARNATI	Category_1	ORIG0027	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
28	20T01R0028	KHURSHID P	Category_1	ORIG0028	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
29	20T01R0029	KRANTHI KUMAR DHADI	Category_1	ORIG0029	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
30	20T01R0030	KAVYA KANDE	Category_1	ORIG0030	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
31	20T01R0031	KUMARI MONALISA SAHOO	Category_1	ORIG0031	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
32	20T01R0032	LATHA RACHAKONDA	Category_1	ORIG0032	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
33	20T01R0033	LAVANYA GIRI	Category_1	ORIG0033	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
34	20T01R0034	MADHURI GAVINI	Category_1	ORIG0034	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
35	20T01R0035	MAHESHWARI DANDU	Category_1	ORIG0035	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
36	20T01R0036	MANISHA PALAMONI	Category_1	ORIG0036	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
37	20T01R0037	MANASA HANUMANDLA	Category_1	ORIG0037	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
38	20T01R0038	MOUNIKA AMGOVATH	Category_1	ORIG0038	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
39	20T01R0039	MOUNIKA LIKKI	Category_1	ORIG0039	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
40	20T01R0040	MEERAVALI SHAIK	Category_1	ORIG0040	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
41	20T01R0041	MEGHANA PANUGANTI	Category_1	ORIG0041	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
42	20T01R0042	MOHAN NENAVATH	Category_1	ORIG0042	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
43	20T01R0043	NAGESH RENDLA	Category_1	ORIG0043	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
44	20T01R0044	NAVANEETHA GADDAM	Category_1	ORIG0044	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
45	20T01R0045	NAVEEN KUMAR KARTHALA	Category_1	ORIG0045	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
46	20T01R0046	NEELES CHOUHARY	Category_1	ORIG0046	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
47	20T01R0047	NEELAVENI BODDUPALLY	Category_1	ORIG0047	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
48	20T01R0048	POOJA BOYAPALLY	Category_1	ORIG0048	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
49	20T01R0049	PRAGATHI AGUMAMIDI	Category_1	ORIG0049	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
50	20T01R0050	PRATHYUSHA KATTA	Category_1	ORIG0050	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
51	20T01R0051	PRIVALIKA GANGEPOGU	Category_1	ORIG0051	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00

POS PAN No:

POS Aadhar No:

Insurance is the subject matter of the solicitation. For more details on risk factors, terms and conditions, please read sales brochure carefully before concluding a sale.

TATA AIG General Insurance Company Ltd. Regd. Office: 15th floor, Tower A, Peninsula Business Park, Ganpatrao Kadam Marg, Off Senapati Bapat M.



WITH YOU ALWAYS

52	20T01R0052	PRAVALIKA J	Category_1	ORIG0052	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
53	20T01R0053	PRAVEEN KUMAR V	Category_1	ORIG0053	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
54	20T01R0054	PRATHIKSHA DESHMUKH	Category_1	ORIG0054	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
55	20T01R0055	PRAVEEN DENKALA	Category_1	ORIG0055	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
56	20T01R0056	POOJITHA KURVETI	Category_1	ORIG0056	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
57	20T01R0057	PRAVEEN A	Category_1	ORIG0057	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
58	20T01R0058	RAJU ALIMINATI	Category_1	ORIG0058	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
59	20T01R0059	RIZWANA	Category_1	ORIG0059	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
60	20T01R0060	RAMA KRISHNA RAPOLU	Category_1	ORIG0060	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
61	20T01R0061	REETHIKA K	Category_1	ORIG0061	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
62	20T01R0062	ROOPADEVU KANCHARLA	Category_1	ORIG0062	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
63	20T01R0063	RISHITHA BHUPATHI	Category_1	ORIG0063	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
64	20T01R0064	SAHITHI KOTLA	Category_1	ORIG0064	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
65	20T01R0065	SAJ CHANDANA GOGIKAR	Category_1	ORIG0065	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
66	20T01R0066	SAJ DIVYA VUNDYALA	Category_1	ORIG0066	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
67	20T01R0067	SAJ KUMAR DANDUGALA	Category_1	ORIG0067	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
68	20T01R0068	SATHVIKA REGU	Category_1	ORIG0068	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
69	20T01R0069	SEEMA MOHAMMED	Category_1	ORIG0069	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
70	20T01R0070	SHASHI ORSU	Category_1	ORIG0070	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
71	20T01R0071	SHIVA SHANKAR YADAV DAVUDA	Category_1	ORIG0071	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
72	20T01R0072	SHIVANI GONGALLA	Category_1	ORIG0072	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
73	20T01R0073	SHIVANI KONDAM	Category_1	ORIG0073	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
74	20T01R0074	SHIVANI PILLI	Category_1	ORIG0074	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
75	20T01R0075	SHREYA KUSA	Category_1	ORIG0075	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
76	20T01R0076	SHRUTHI GOURANI	Category_1	ORIG0076	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
77	20T01R0077	SOFIYA MEDIDHI	Category_1	ORIG0077	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
78	20T01R0078	SREEJA PINNAPUREDDY	Category_1	ORIG0078	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
79	20T01R0079	SUPRIYA KOTHILI	Category_1	ORIG0079	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
80	20T01R0080	SWEETY LAHARI REVELLI	Category_1	ORIG0080	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
81	20T01R0081	SWETHA KONDURU	Category_1	ORIG0081	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
82	20T01R0082	SAJ SHRITHA KASSAM	Category_1	ORIG0082	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
83	20T01R0083	SAI TEJA KADAVATH	Category_1	ORIG0083	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
84	20T01R0084	SAMPURNA RANGINENI	Category_1	ORIG0084	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
85	20T01R0085	SAMYUKTHA REDDY KANDHUKURI	Category_1	ORIG0085	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
86	20T01R0086	SINDHU CHEGONDI	Category_1	ORIG0086	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
87	20T01R0087	SOUJANYA UPPU	Category_1	ORIG0087	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
88	20T01R0088	SOUMYA YERRA	Category_1	ORIG0088	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
89	20T01R0089	SRAVANTHI ANUGULA	Category_1	ORIG0089	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
90	20T01R0090	SAI MEGHANA GOURU	Category_1	ORIG0090	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
91	20T01R0091	SRI SWETHA KOMMI	Category_1	ORIG0091	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
92	20T01R0092	SWETHA MARRI	Category_1	ORIG0092	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
93	20T01R0093	SHAIKHA FATIMA	Category_1	ORIG0093	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
94	20T01R0094	SHIVA KUMAR REDDY MADILAPURAM	Category_1	ORIG0094	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
95	20T01R0095	THARUN ANUPURAM	Category_1	ORIG0095	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
96	20T01R0096	TEJASWINI KARNEKANTI	Category_1	ORIG0096	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
97	20T01R0097	UDAY DASARI	Category_1	ORIG0097	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
98	20T01R0098	VJAY NIMMALA	Category_1	ORIG0098	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
99	20T01R0099	VISHWANATH E	Category_1	ORIG0099	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00
100	20T01R00A0	VANDANA MARGAM	Category_1	ORIG0100	200,000.00	200,000.00	200,000.00	200,000.00	0.00	5,000.00

A. M. S.
PRINCIPAL

ori Indu Institute of Pharmacy
MERIGUDA, Ibrahimpatnam M.S
U. B. DIST-501 608.



POS PAN No:

POS Aadhar No:

Insurance is the subject matter of the solicitation. For more details on risk factors, terms and conditions, please read sales brochure carefully before concluding a sale.

TATA AIG General Insurance Company Ltd. Regd. Office: 15th floor, Tower A, Peninsula Business Park, Ganpatrao Kadam Marg, Off Senapati Bapat Marg, IRDA Registration No.108, CIN No:U85110MH2000PLC128425



QUOTATION FOR GROUP PERSONAL ACCIDENT POLICY

We have quoted on "Quote to Win" basis & by considering following risk considerations / past loss information & other employee details as available / shared with us & should the same be different, please do confirm the same as it has implications on appropriate pricing of the risk.

Past Claims Details : 0238426167 **Due Date** 0-Mar-21

REFERENCE NO. & DATE : HYD/ Agency/ RN 31-Mar-21
NAME : SRI INDU INSTITUTE OF PHARMACY
ADDRESS : SHERIGUDA, IBRAHIMPATNAM, R.R. DIST, HYDERABAD RANGAREDDY 501510
 K.V, RANGAREDDY TELANGANA INDIA

NUMBER OF LIVES COVERED : 36
BUSINESS DESCRIPTION : Service Industry
AGE BRACKET : From 18 To 65 Years
SCOPE OF COVERAGE : 24 hours worldwide.

BENEFITS OFFERED

Capital Benefits : Accidental Death (AD)
 : Accidental Dismemberment (DM)
 : Accidental Permanent Total Disablement (PTD)
 : Accidental Permanent Partial Disablement (PPD)

Other Benefits : Accidental Medox - Fixed, IPD up to Rs 5,000 or actual whichever is less subject to 24 Hrs. hospitalization

Rider Benefits : Act of terrorism is covered
TYPE OF POLICY : Named (Named wise declaration from the company needs to be taken)

DESCRIPTION OF INSURED : Only Permanent Employees of the company are covered.

AGGREGATE LIMIT (Per Accident Limit) : Rs. 27,00,000
 Note: This is Any One Accident Limit, there is no limits on no. of accidents in a year

DEDUCTIBLE / ELIMINATION : Nil
SUM INSURED BASIS : Fixed
TOTAL SUM INSURED : Rs. 1,08,00,000
MAXIMUM SUM INSURED PER PERSON : Rs. 3,00,000

Sr. No.	Category/ Designation	No. of Persons	Average Sum Insured Per Person (In Rs.)			
			AD	DM	PTD	PPD
1	Employees	36	Rs. 3,00,000	Rs. 3,00,000	Rs. 3,00,000	Rs. 3,00,000
	Total	36				

Pre Tax Per Mille Rate : 0.4630
Pre Tax Premium : Rs. 5,000
Add: GST 18% : Rs. 900
Post Tax Premium : Rs. 5,900

MANDATORY DOCUMENTS FOR RENEWALS:

- 1 Sealed & Stamped Quote Sheet
- 2 GST & PAN
- 3 For Named Policy - Proper data sheet including but not limited to - Employee Name, Designation, DOB and Salary

A.M.S.
 PRINCIPAL
 Sri Indu Institute of Pharmacy
 SHERIGUDA, Ibrahimpatnam
 R.R. DIST-501 508.





PAYMENT IN FAVOUR OF : TATA AIG GENERAL INSURANCE COMPANY LIMITED
PAYMENT MODE : Annual in advance.

Additional Terms:

- 1 In case the SI is a multiple of salary, the claims will be paid on the Salary as computed at the time of this quote unless endorsement for change in the sum Insured has been passed.
- 2 Without mandatory buffer amount of minimum 10% or as appropriate, endorsements will not be passed in compliance with Section 64VB of Insurance Act for CBC (Cash before Cover) & new employees will not covered.
- 3 If renewal policy, then the policy will be processed only on reconciliation / receipt of previous years endorsements & payments received.
- 4 Sum Insured should not exceed 10 times of Gross Annual Salary of the employees.
- 5 Only Permanent Employees of the company are covered the coverage of contractual employees will be limited to during work hours or while commuting. Their personal or leisure trip or engagement in any other assignment will be out of scope in this policy - not applicable if approved by underwriter as per description of insured mentioned above
- 6 For the weekly benefit to be given to the contract employees the client has to give us the declaration on its letter head that all the contract employees are working exclusively for the client only and are not part time/full time employed with any other company/ organization.
- 7 Data for Addition/ Deletion endorsements should be provided to the insurance company within 45 days of the date of joining of the member.
- 8 Premium shall not be refunded in case of any claims being paid under the policy
- 9 Professional sports are an exclusion
- 10 Underground mining & Tunnelling are an exclusion
- 11 Offshore risks are excluded from the scope of the policy
- 12 All Armed Security forces , Naval, military or air force personnel are excluded from the scope of the policy.

Quote Validity: - 60 days from the date proposal or as mentioned above, whichever is earlier. Beyond validity, the quote has to be revalidated even if there is NO change in the rates/ terms and conditions. While at the time of the premium cheque being paid, if there is a change in ANY of the parameters given above, please inform the undersigned, with a copy to the policy services

Assuring you of the best services at all times and looking forward for mutually fruitful relationship.

Thanking you,

Yours sincerely,

For, TATA AIG GENERAL INSURANCE COMPANY LIMITED

City Noida Date 31 March 2021

This is not an acceptance of risk. Quotation will vary in case of change in any parameters considered for pricing.
Full details of the cover are included in the standard Tata AIG General GPA Policy terms.

We are pleased to accept your proposal & the above said terms & conditions.

A. M. Srinivas
31/3/21

SRI INDU INSTITUTE OF PHARMACY
Sheriguda (V), Ibrahimpatnam (M),
R.R. Dist. Hyderabad-501 510.

Authorized Signatory with Company Stamp / Seal

Date: 31 Mar 2021

Place: SIIIP, Sheriguda

Submission of MANDATORY DOCUMENTS is must (along with premium payment) for issuance of policy document.

A. M. Srinivas
PRINCIPAL
Sri Indu Institute of Pharmacy
SHERIGUDA, Ibrahimpatnam M.C.
R. R. DIST-501 508.





QUOTATION FOR GROUP PERSONAL ACCIDENT POLICY

We have quoted on "Quote to Win" basis & by considering following risk considerations / past loss information & other employee details as available / shared with us & should the same be different, please do confirm the same as it has implications on appropriate pricing of the risk.

Past Claims Details : 0238426171 **Due Date** 9-Mar-21

REFERENCE NO. & DATE : HYD/ Agency/ RN 31-Mar-21
NAME : SRI INDU INSTITUTE OF PHARMACY
ADDRESS : SHERIGUDA, IBRAHIMPATNAM, R.R. DIST, HYDERABAD RANGAREDDY 501510
K.V. RANGAREDDY TELANGANA INDIA

NUMBER OF LIVES COVERED : 100
BUSINESS DESCRIPTION : Educational Institutes
AGE BRACKET : From 3 To 65 Years
SCOPE OF COVERAGE : 24 hours worldwide.

BENEFITS OFFERED

Capital Benefits : Accidental Death (AD)
: Accidental Dismemberment (DM)
: Accidental Permanent Total Disablement (PTD)
: Accidental Permanent Partial Disablement (PPD)

Other Benefits : Accidental Medex - Fixed. IPD up to Rs 5,000 or actual whichever is less subject to 24 Hrs. hospitalization

Rider Benefits : Act of terrorism is covered
TYPE OF POLICY : Named (Named wise declaration from the company needs to be taken)

DESCRIPTION OF INSURED : Only Students of the Education Institute are covered.

AGGREGATE LIMIT (Per Accident Limit) : Rs. 50,00,000
Note: This is Any One Accident Limit, there is no limits on no. of accidents in a year

DEDUCTIBLE / ELIMINATION : Nil
SUM INSURED BASIS : Fixed
TOTAL SUM INSURED : Rs. 2,00,00,000
MAXIMUM SUM INSURED PER PERSON : Rs. 2,00,000

Sr. No.	Category/ Designation	No. of Persons	Average Sum Insured Per Person (In Rs.)			
			AD	DM	PTD	PPD
1	Students	100	Rs. 2,00,000	Rs. 2,00,000	Rs. 2,00,000	Rs. 2,00,000
	Total	100				

Pre Tax Per Mille Rate : 0.4449
Pre Tax Premium : Rs. 8,898
Add: GST 18% : Rs. 1,602
Post Tax Premium : Rs. 10,500

Note:

- In case of death of student, all eligible claims will be paid in favor of Parent as per the first name appearing in institute's records in the event of non availability of nominee details.
- In case of death of Insured Parent all eligible claims will be paid in favor of Legal Heir only.

MANDATORY DOCUMENTS FOR RENEWALS:

- 1 Sealed & Stamped Quote Sheet
- 2 GST & PAN
- 3 For Named Policy - Proper data sheet including but not limited to - Employee Name, Designation, DOB and Salary

A. M. S.
PRINCIPAL
Sri Indu Institute of Pharmacy
SHERIGUDA, Ibrahimpatnam
R.R. DIST-501 508.





PAYMENT IN FAVOUR OF : TATA AIG GENERAL INSURANCE COMPANY LIMITED
PAYMENT MODE : Annual in advance.

Additional Terms:

- 1 In case the SI is a multiple of salary, the claims will be paid on the Salary as computed at the time of this quote unless endorsement for change in the sum insured has been passed.
- 2 Without mandatory buffer amount of minimum 10% or as appropriate, endorsements will not be passed in compliance with Section 84VS of Insurance Act for CSC (Cash before Cover) & new employees will not covered.
- 3 If renewal policy, then the policy will be processed only on reconciliation / receipt of previous years endorsements & payments received.
- 4 Sum Insured should not exceed 10 times of Gross Annual Salary of the employees.
Only Permanent Employees of the company are covered the coverage of contractual employees will be limited to during work hours or while commuting. Their personal or leisure trip or engagement in any other assignment will be out of scope in this policy - not applicable if approved by underwriter as per description of insured mentioned above
- 5 For the weekly benefit to be given to the contract employees the client has to give us the declaration on its letter head that all the contract employees are working exclusively for the client only and are not part time/full time employed with any other company/ organization.
- 6 Data for Addition/ Deletion endorsements should be provided to the insurance company within 45 days of the date of joining of the member.
- 7 Premium shall not be refunded in case of any claims being paid under the policy
- 8 Professional sports are an exclusion
- 9 Underground mining & Tunnelling are an exclusion
- 10 Offshore risks are excluded from the scope of the policy
- 11 All Armed Security forces , Naval, military or air force personnel are excluded from the scope of the policy.

Quote Validity: - 60 days from the date proposal or as mentioned above, whichever is earlier. Beyond validity, the quote has to be revaluated even if there is NO change in the rates/terms and conditions. While at the time of the premium cheque being paid, if there is a change in ANY of the parameters given above, please inform the undersigned, with a copy to the policy services

Assuring you of the best services at all times and looking forward for mutually fruitful relationship.

Thanking you,

Yours sincerely,

For, TATA AIG GENERAL INSURANCE COMPANY LIMITED

City Noida

Date 31 March 2021

This is not an acceptance of risk. Quotation will vary in case of change in any parameters considered for pricing.
Full details of the cover are included in the standard Tata AIG General GPA Policy terms.

We are pleased to accept your proposal & the above said terms & conditions.

A. M. S. 31/3/2021

SRI INDU INSTITUTE OF PHARMACY
Sheriguda (V), Ibrahimpatnam (M),
R.R. Dist. Hyderabad-501 510.

Authorized Signatory with Company Stamp / Seal

Date: 31 Mar 2021

Place: SIIP, Sheriguda

Submission of MANDATORY DOCUMENTS is must (along with premium payment) for issuance of policy document.



A. M. S.
PRINCIPAL
Sri Indu Institute of Pharmacy
SHERIGUDA, Ibrahimpatnam M.,
R.R. DIST-501 508.



13-8-2018,
Hyderabad.

TO
The principal,
Sri Indu Institute of Pharmacy,
Ushesiguda,
Ibrahimpattanam.

Respected Sir,

Sub: Leave application for Marriage.

I am P. Venkatesh, Working as Assistant Professor in the college. I am delighted to say that my marriage date has been fixed on 19-8-2018. SD regarding that I have work at my home for that matter I need leave for 2 weeks, kindly grant the permission. ~~thank~~ to take leave from 13-8-2018 to 26-8-2018.

Thank you Sir,

Conveyed to Chairman Sir
for favourable consideration,
13/8/18

Yours sincerely,

P. Venkatesh

Asst. Professor

Sri Indu Institute of Pharmacy

Approved
13/8/18

PRINCIPAL
SRI INDU INSTITUTE OF PHARMACY
Sheriguda (V), Ibrahimpattanam (M),
R.R. Dist. Hyderabad - 501 510.



Sri Indu Institute of Pharmacy

(Approved by A.I.C.T.E. & PCI-NEW DELHI, Affiliated to JNTUH-Hyderabad.)
Sponsored by New Loyola Model Education Society, Vanasthalipuram, Hyderabad.

No. Date : 13-8-2018

DEBIT VOUCHER

DEBIT Mr. P. Venkatesh


Particulars Advance salary.


On Account of Marriage.


Rupees Rs. 15,500/-

✓ fifteen thousand five hundred rupees only.

By Cash / Cheque / D.D. No. _____ Dt. _____ on _____

Rs. Rs - 15,500/- Prepared by: 

Confirmed with Chairman Sir
Checked by: 

Receiver's Signature 

17-8-2018
Hyderabad.

To

The principal,
Sri Indu Institute of Pharmacy,
Sheriguda,
Ibrahimpattanam.

Respected Sir,

Sub:- Leave application for marriage.

I am M. Soumya, working as Assistant professor in the college. I am delighted to say that my marriage date has been fixed on 23-8-2018. So regarding that I have work at my home for that matter. I need leave for 2 weeks, kindly grant the permission to take leave from 17-8-2018 to 30-8-18.

Thanking you Sir,

Forwarded to
Principal Sir
for favour
17/8/18

Yours sincerely,
M. soumya
Asst. professor
Sri Indu Institute
of Pharmacy.

Approved
16/8/18

PRINCIPAL
SRI INDU INSTITUTE OF PHARMACY
Sheriguda (V), Ibrahimpattanam (M),
R.R. Dist. Hyderabad - 501 510.



Est'd : 2005

Sri Indu Institute of Pharmacy

(Approved by A.I.C.T.E & PCI-NEW DELHI, Affiliated to JNTUH-Hyderabad.)
Sponsored by New Loyola Model Education Society, Vanasthalipuram, Hyderabad.

No.

DEBIT VOUCHER

Date : 17-8-2018

DEBIT Mr. M. Sumanya

Particulars Advance Salary

On Account of Marriage.

Rupees Rs. 15,500/-

✓ fifteen thousand five hundred only.

By Cash / Cheque / D.D. No. _____ on _____

Rs. Rs 15,500/-

Prepared by:

[Signature]

Confirmed
JOHN

Checked by
[Signature]
17/8/18

Receiver's Signature

[Signature]

maternity leave application letter

30-4-2021,
Hyderabad.

To,

The Principal,

Sri Indu Institute of Pharmacy,

Sheikuda,

Abrahim patnam.

Respected Sir,

Sub:- Requesting the grant of maternity leave -

Req.

Myself Tanaki working as Assistant professor in our organisation is pleased to inform you that, I am in the eight month of pregnancy and doctor suggested me to take rest. As my due date is in the month of June.

I would like to avail my maternity leave from 30th April 2021 till 29th July 2021.

Hence I request you to grant me the leave for mentioned months.

Thanking you, *forwaded by*
favourable Consideration

Principal
SRI INDU INSTITUTE OF PHARMACY
Sheikuda, Abrahim Patnam (M.P.)
R.R. Dist. Hyderabad - 505 904

20/4/2021

Yours faithfully
Tanaki

Asst. Professor
Sri Indu Institute of Pharmacy

Maternity leave application

8-6-2019

Hyderabad.

To,
The Principal,
Sri Indu Institute of Pharmacy,
Sheriguda,
Ibrahim Patnam.

Respected sir,

sub:- Requesting the grant of
maternity leave - Reg.

myself T. Naga Aparna working
as Associate Professor in our
organisation is pleased to inform
you that, I am in the fourth month
of pregnancy and doctor suggested
me to take rest. As my due
date is in the month of October
I would like to avail my
maternity leave from 10th June 2019
till October 30th 2019. Hence I
request you to grant me this leave
for mentioned months. *forward for favourable acceptance*

Thanking you,

yours faithfully,
T. Naga Aparna
Associate Professor,
Sri Indu Institute of Pharmacy.

Amal
PRINCIPAL
SRI INDU INSTITUTE OF PHARMACY
Sheriguda (V), Ibrahimpatnam (M),
R.F. Dist. Hyderabad - 501 510.

Maternity leave application letter

9-10-2019,
Hyderabad.

To,
The Principal,
Sri Indu Institute of Pharmacy,
Sherguda,
Ibrahim Patnam.

Respected sir,

Sub:- Requesting the extension of my
maternity leave - Reg.

With all due respect, it is to
state that myself T. Naga Aparna
working as Associate Professor in
our organisation was blessed
with a baby boy on 8-10-2019.
Hence I would request you to
extend my leave for two more
months i.e., till the month of
December.

forwarded
to Principal Sir

Thanking you,

9/10/2019

yours faithfully,
T. Naga Aparna
Associate Professor
Sri Indu Institute of Pharmacy.

Amund
Report duties ✓
2nd Jan. 2020
A.M.

Maternity leave application letter

To

The principal,

Sri Indu Institute of Pharmacy,

Sheriguda,

Ibrahimpatnam.

Hyderabad.

2/6/18

Respected sir,

Sub: Requesting the grant of maternity leave.

Myself Sivalli working as Assistant professor in our organisation is pleased to inform you that, I am in the months of pregnancy and doctor suggested me to take rest. As my due date is in the month of . I would like to avail my maternity leave from

Hence I request you to grant me the leave for mentioned months.

Thanking you.

Approved
2/6/18
PRINCIPAL
SRI INDU INSTITUTE OF PHARMACY
Sheriguda (M), Ibrahimpatnam (M),
R.R. Dist. Hyderabad - 501 510.

Forwarded to
Principal by
Sivalli
Candidate

Yours faithfully
Sivalli,
Assistant professor

Sri Indu Institute of Pharmacy