

FORM OF APPLICATION FOR LEAVE

1. Name of the applicant :-
2. Leave Rules applicable :-
3. Post held :-
4. Department/Office :-
5. Pay :-
6. House rent allowance, conveyance allowance or other compensatory allowance drawn in the present post:
7. Nature and period of leave applied for and the date: from which leave is required and period of leave:
8. Ground for leave: -
9. Date of return from leave and period of that last leave: Date of return from last leave-
Period of last leave-

Place:

Date:

Signature of the Applicant.

FOR OFFICE USE

1. Statement of leave granted to the applicant prior to this application.

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1. Earned Leave :-
 2. Half Pay Leave :-
 3. Special disability leave/
Study leave/Maternity Leave.

Total :

1. Certified that Shri.
Designation
at his credit as on

has the following leave

- (a) Earned Leave :-
- (b) Half Pay Leave :-

2. Order/Recommendation :
Date :

Signature of Head of Office.