

APPLICATION FORM FOR EARNED LEAVE OR EXTENSION OF LEAVE

1. Name of applicant	:	_____
2. Post held	:	_____
3. Department, Office and Section	:	_____
4. Pay	:	_____
5. House Rent and other Compensatory allowances drawn in the present post	:	NA
6. Nature and period of leave	:	Earned Leave/ <del>Commutated Leave</del>
7. Number of Days & date from which the leave required	:	Number of Days: FROM _____ TO _____
8. Sunday, and holidays, if any proposed to be prefixed/suffixed to leave	:	PREFIX: _____ SUFFIX: _____
9. Grounds on which leave is applied for	:	_____
10. Date of return from last leave and the nature and period of that leave	:	_____
11. I propose/do not propose to avail myself of leave travel concession for the block years _____	:	_____
12. Address during the leave period	:	_____
		_____
		_____
		_____

Signature of applicant  
(With date)

13. Remarks and or recommendation of the Controlling Officer.

Signature/Designation  
(With date)

CERTIFICATE REGARDING ADMISSIBILITY OF LEAVE

14. Certified that \_\_\_\_\_ for (Nature of Leave) \_\_\_\_\_ (period) from \_\_\_\_\_ to \_\_\_\_\_ is admissible under Leave Rule 7.21 of CSKHPKV Statutes 1988.

Signature/Designation  
(With date)

15. Orders of the competent authority to grant leave

Signature/Designation  
(With date)

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If the applicant is drawing any compensatory allowance, it should also be indicated in the orders on the expiry of leave, the Government serving similar allowance.