

THE SECOND SCHEDULED

{See Rule 3(h)}

FORM

(See rule 14)

APPLICATION FOR 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.

6. Nature and period of leave applied for and date from which required.

7. Sunday and holidays, if any, proposed to be prefixed/ suffixed to leave.

8. Ground on leave is applied for.

9. Date of return from last leave and the nature and period of that leave

10. I propose, do not propose to avail myself of leave travel concession for the block
years _____
during the ensuing leave.

11. Address during leave period:

Signature of Applicant
(With Date)

12. Remarks and / or recommendation of the Controlling Officer.

Signature (With Date)
Designation