

APPLICATION FOR EARNED LEAVE

Date:

1. EMPLOYEE CODE NO. :
2. NAME OF APPLICANT :
3. POST HELD :
4. SECTION/DIVISION :
5. INTERCOM/TELEPHONE NO. :
6. PERIOD OF LEAVE APPLIED (no. of days) :
- FROM :
- TO :
7. STATION LEAVING PERMISSION :
- FROM :
- TO :
8. REASON FOR APPLYING THIS LEAVE :
9. NO. OF LEAVES ALREADY AVAILED  
    IN THE CURRENT YEAR :
10. ADDRESS DURING LEAVE PERIOD :

11. ALTERNATIVE ARRANGEMENT :

(Alternative employee details)

Signature

Signature:

Name:

Name:

Designation:

Designation:

Recommendation: YES/ NO

Checked by

HOD/ HOD- I/C

Junior Assistant

**Verified by**

**Forwarded By**

**Assistant Registrar**

**Registrar-I/c**

**Approved / Not Approved**

**Director**