

Leave Application Form

Applicant's Information					
Name of the applicant					
Designation					
Department					
Applicant ID No					
Type of leave					
Reason of leave (Incase of medical leave, medical certificate is required. Incase of duty leave original papers are required to attach).					
Is station leave necessary? If yes, permission required from the authority, explain reason.					
Leave starts from		To		Total Day	
Leave Address with Mobile/Phone					
Leave Substitute					
Applicant's signature (with date)					

Sanction/Recommendation from the concerned department/Section				
Department				
Designation of the concerned Dept. Head				
*Recommendation/Sanction	Yes		No	
Signature (with date)				

Please do not write below this point

For Registrar's Office use Only				
Leave granted?	Yes		No	
Leave with pay?	Yes		No	
Comments (if any)				
Authorized signature (with date)				