

**APPLICATION FOR LEAVE**

- Note:- i) Item 1 to 8 must be filled in by all applicants.  
ii) Item 11 applies only in case of Government servant of BPS-16 and above.

- 1- Name of Applicant \_\_\_\_\_  
2- Leave rule applicable \_\_\_\_\_  
3- Post hold \_\_\_\_\_  
4- Department or Office \_\_\_\_\_  
5- Pay of Officer \_\_\_\_\_  
6- House Rent Allowance/Conveyance Allowance or other Compensatory Allowance in the present post.

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- 7- a) Nature of leave \_\_\_\_\_  
b) Period of Leave \_\_\_\_\_  
c) Date of Commencement \_\_\_\_\_  
d) Purpose of Leave \_\_\_\_\_

- 8- Particular Rule under which Leave is Admissible \_\_\_\_\_  
a) Date of Return from last leave. \_\_\_\_\_  
b) Nature of Leave \_\_\_\_\_  
c) Period of leave in days \_\_\_\_\_

Date: \_\_\_\_\_ signature of Applicant \_\_\_\_\_

- 8- Remarks and recommendation of controlling office  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 9- Certified that leave applied for is admissible under rule \_\_\_\_\_ necessary conditions are fulfilled.  
Date \_\_\_\_\_ Signature \_\_\_\_\_  
Designation \_\_\_\_\_

- 10- Report of Audit Officer  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Date \_\_\_\_\_ Signature \_\_\_\_\_  
Designation \_\_\_\_\_

- 11- Orders of the Sanctioning authority certifying that on the expiry of leave the applicant is likely to return to the same post or another past carrying the compensatory allowances being drawn by him
- Date \_\_\_\_\_ Signature \_\_\_\_\_  
Designation \_\_\_\_\_