

APPLICATION FOR CASUAL LEAVE / SPECIAL CASUAL LEAVE/ DUTY LEAVE

1. Name of the Applicant
2. Designation
3. Department
4. Purpose of Leave

[Photocopy of letter of invitation should be enclosed. However, for confidential work no such document be required]

5. Period for which leave is required

For / From (F/N) / (AN) to(F/N) / (AN) Days

6. Title of Leave :
 - (i) Casual Leave ()
 - (ii) Special Casual Leave ()
 - (iii) To be treated as on Duty ()

7. Whether TA/DA shall be required to be paid (Yes / No)

If yes, head of account

8. The following will look after the work in my absence on / for the period
From to

- (i) Name
 - (ii) Designation

9. Address and Contact Number during Leave

Name

Address

Contact No.

Name

[Signature of Applicant]

Designation

Department

Dated:

Office Report

1. Total Casual Leave / Special Casual Leave / Duty Leave availed during the current Calendar /
Academic Year till date: Days
2. Balance of Casual Leave / Special Casual Leave / Duty Leave at present Days

Signature of the Dealing Assistant

Forwarding Remark / Recommendation

Chairman / Principal etc.
[Seal]

Dean
[Seal]

SANCTIONED

Dated

Name & Designation
[Seal]