APPLICATION FOR EARNED LEAVE.

1) Name of Applicant		5) 12	·	
2) Post Hold	•	:-	. 14	
3) Department office.		:-		
4) Pay, House Rent, Allowance, Convenience of other compensatory Allowance in the present post		:-		
		*		
		ž.		
5) Nature of leave and period apply for		:-		
6) Ground which leave is applied for		:-		
7) Date for return from last leave and n Period of that leave.	ature and	:-		,
0.0				
8)Date.		;-		
9) Remarks and recommendation of the Controlling officer	:	;=		
10) Report of Audit Officer				
11) Statement of leave graticed to applie Previous to this application.	cation	;-	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		Signatur	e of Applicant	_
		Signaturi	s of Applicant	••
12) Certified that the leave or a or avera Month and				
Day on is admissible u Authority	nder the sanctic	on •		
*				

Date. ·

Signature and Designation