



Application for availing the Earned/Commuted leave

1. Name of the Applicant : _____
2. Designation : _____
3. Department/Branch : _____
4. Nature of Leave applied for : _____
5. Period of Leave : _____
6. Period to be Prefixed/Suffixed being : _____
Saturday/Sunday/Holidays, if any
7. Grounds on which the leave is : _____
applied for (in case of leave on
medical grounds, Medical Certificate
to be attached)
8. Address while on leave : _____

Dated : _____

Signature of the applicant

Sanctioned/Recommended and forwarded to the Establishment Branch

(Signature of the Branch Officer with Seal)

Sub. : Departure Report.

I hereby, submit my departure report today _____ FN/AN for availing Earned / Commuted leave from _____ to _____ with prefix holidays falling on _____.

(Sign. of the applicant)

Sub. : Joining Report

I hereby, submit my joining report today _____ FN/AN after availing Earned / Commuted leave from _____ to _____ with suffix holidays falling on _____.

(Sign. of the applicant)

Forwarded