

Application for Leave

Name -----

Name of leave      Casual / Special Casual / Optional

No. of day      -----      Date from ----- to -----

Designation and Department -----

Supporting document      (in case of special C.L.) -----

Remarks -----

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Signature of Applicant

Recommended By

(Head of the Department)

For office use

**Casual Leave**

**Optional Leave**

\*Total Leave Due -----

\*Total Leave Due -----

\*Leave Availed so far -----

\*Leave Availed so far -----

\*Balance on date -----

\*Balance on date -----

Signature

Signature

Sanctioning Authority

D.A.

P.A./Secy.