

APPLICATION FOR LEAVE

(For both Gazetted and Non-Gazetted Govt. Servants)

NOTE.—Items 1 to 10 must be filled in by all applicants whether Gazetted or Non-Gazetted. Item 13 applies only in the case of Gazetted Officers. Items 14 and 15 apply only in the case of Non-Gazetted Officers.

- 1. Name of applicant .....
- 2. Leave rules applicable .....
- 3. Post held .....
- 4. Department or Office .....
- 5. Pay .....
- 6. House rent allowance, conveyance allowance or other compensatory allowances \*drawn in the present post. ....
- 7. Nature and period of leave applied for and date from which required. ....
- 8. Ground on which leave is applied for .....
- 9. Date of return from last leave and the nature and period of that leave. ....
- 10. Leave address, if granted. ....

I undertake to refund the difference between the leave salary drawn during leave on average pay/commuted leave and that admissible during leave on half average pay/half pay leave, which would not have been admissible had the proviso to F. R., 81 (b) (ii)/M.B.F.R., 79(c)/Rule 11(c) of the Revised Leave Rules, 1933/Rule 14(c) of Madhya Pradesh Revised Leave Rules, 1934/Rule 983 (c) of the Rajasthan Service Rules, not been applied in the event of my retirement from service at the end or during the currency of the leave.

Date ..... 200      Signature & Designation }  
 Signature & Designation }

12. Remarks and/or recommendation of the Controlling Officer.

Date ..... 200      Signature & Designation }  
 Signature & Designation }

13. Report of the Audit Officer.

Date ..... 200      Signature & Designation }  
 Signature & Designation }

14. Statement of leave granted to applicant previous to this application.—

Nature of leave (1)	In current year (2)	During past year (3)	Total (4)
Privilege/on average pay/Earned			
On average pay on M. C./Commuted			
On half average pay/half pay			
Not due			
On quarter average pay			
Extraordinary			
Total :			

15. Certified that leave on average pay/earned leave for ..... months and ..... days  
 from ..... 200 . to ..... 200 is admissible  
 under ..... of the .....

Date ..... 200      Signature & Designation

16. Orders of the Sanctioning Authority .....  
 Date ..... 200      Signature & Designation

\*If the applicant is drawing any compensatory allowance, the sanctioning authority should state whether on the expiry of leave he is likely to return to the same post or to another post carrying a similar allowance.

क्र. सं. 824/2916/77/मि-1/वार. दिनांक 21 अक्टूबर 1977 ई.

Name of Government Servant कर्मचारी का नाम .....  
 Date of Birth जन्म तिथि .....  
 Date of commencement of continuous service लगातार सेवा प्रारम्भ होने की तिथि .....

Earned Leave अर्जित छुट्टी							Half Pay Leave on Priv													
Particulars of service in the calendar half year छमाही सेवा का विवरण		Complete months of service in the calendar half year छमाही सेवा के पूरे माहों की संख्या		E.L. Credited at beginning of half year छमाही प्रारम्भ पर छुट्टियों की संख्या		No. of days of extra ordinary leave (col. 33) availed during the previous calendar half year अव्य प्रकार की छुट्टियों की संख्या बिना वेतन अवकाश (कालम 33) जो गत छ माहों में ली हो।		E.L. to be deducted (1/10th of the period in Col 5) घटाये जाने वाले अर्जित अवकाश में (अवधि का 1/10 कालम क्र. 5)		Total E.L. at credit in days (Col 4 + 11.6) subject to appropriate limit उपयुक्त सीमा अर्जित अवकाश (कालम 4+11.6)			Leave Taken छुट्टी जो ली गई			Balance of E.L. on run from leave (C-17.10) छुट्टी से बाकिर आने पर शेष छुट्टियों की संख्या कालम (7-10)		Lenth of service रोवा अवधि		Cre
From से	To तक	From से	To तक	From से	To तक	From से	To तक	From से	To तक	From से	To तक	From से	To तक	No. of Days दिनों की संख्या	From से	To तक	No. of completed years पूरे वर्षों की संख्या	Leave earned year's (कालम क्र. 15)		
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18			

Note :- 1. The eamed leave due should be expressed in days.  
 2. When a Government servant is appointed during the course of particular half-year, E.L. should be credited at the rate of 21/2 days for each completed month and fraction of a day will be rounded to the nearest day.  
 3. The entries in Col 6 should be in complete days. Fraction of a day will be rounded to the nearest day. i.e. fraction being half should be ignored and that a half or more should be rounded to a day.

Half Pay Leave (On activate affairs and on medical certificate)

Length of service From To	No. of completed yrs	Credit of Leave Leave at earning (in days)	Credit of Leave at earning credit (col. 15+ 22)	Leave taken against the earning son half pay From To	No. of	Commuted leave on medical certificate on Full pay From To	No. of	C. leave without M. certificate for studies certificate to be in public Interest (Ltd to 180 days 1/2 pay leave converted into 90 days commuted leave in entire service From To No. of day 22-A 22-B 22-C		
12	13	14	15	16	17	18	19	20	21	22

Leave Taken Computed Leave	Leave not due Limited to 30 days in emmtores	service on medical certificate	No. of days From To	No. of days From To	Service Otherwise than on medical certificate	Total of leave not due	Total half any leave taken (col. 19+23+30)	Balance of 1/2 pay in leave on return from (col. 16-31)	Other kind leave taken
converted into half pay leave twice col. No. 22 and 23 (2)	24.	25.	24.	25.	28.	30.	31.	32.	33.

कार्यालय प्राचार्य,  
शासकीय महिला पोलिटेकनिक महाविद्यालय,  
भोपाल .

क्रमांक/शा. म. पो. म. भो. /स्था/2004/

भोपाल, दिनांक.....

प्रति,

श्री/श्रीमती/कु०.....

शासकीय महिला पोलिटेकनिक महाविद्यालय,  
भोपाल ४६१००५.

विषय:- अर्जित/लघुकृत अवकाश के संबंध में स्पष्टीकरण बाबत ।

सन्दर्भ:- आपका आवेदन-पत्र क्रमांक निल, दिनांक.....

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विषयान्तर्गत लेख है कि आपके द्वारा प्रस्तुत उपरोक्त संदर्भित आवेदन पत्र अनुसार आपने दिनांक.....से दिनांक..... तक कुल..... दिन का लघुकृत/अर्जित अवकाश का उपभोग किया है । नियमानुसार अवकाश स्वीकृत करने हेतु आवेदन निर्धारित फार्म में भरकर प्रस्तुत किया जाना चाहिये । किन्तु आपके द्वारा आज दिनांक तक न तो निर्धारित फार्म ही भरा गया और न ही ज्वाइंजिंग रिपोर्ट ही प्रस्तुत की गई है । आपके द्वारा की गई लापरवाही के संबंध में आप अपना स्पष्टीकरण तथा निर्धारित फार्म भरकर दिनांक..... तक कार्यालय में प्रस्तुत करें अन्यथा आपके विरुद्ध कड़ी कार्यवाही की जावेगी एवं लीला गया अवकाश अस्वीकृत करते हुए उक्त अवधि का सल. डबल्यूपी. किया जावेगा ।

प्राचार्य,  
शासकीय महिला पोलिटेकनिक,  
महाविद्यालय, भोपाल .