APPLICATION CASUAL LEAVE/RESTRICTED HOLIDAY

1. Name of applicant - Shri/Smt.

2. Post Hold -

3. Section in which working -

4. Period of CL/RH leave applied for

 with indication of date -

5. Sunday & Holidays if any proposed

 (to be affixed for leave) -

6. Ground on which leave is applied for

Date\_\_\_\_\_\_\_\_\_ (Signature of the Applicant)

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7. Certified that\_\_\_\_\_\_\_\_\_days of CL and\_\_\_\_\_\_\_\_\_RH is due to his/her credit at present.

8. Signature with date of Recommending authority -

9. Signature with date of Sanctioning authority -

10. Enterel in C.L. Register at page No.\_\_\_\_\_\_\_\_\_\_\_\_\_Sr.No.\_\_\_\_\_\_\_\_\_\_\_\_\_