

राष्ट्रीय प्रौद्योगिकी संस्थान पुदुच्चेरी

NATIONAL INSTITUTE OF TECHNOLOGY PUDUCHERRY

APPLICATION FOR EARNED LEAVE / COMMUTED LEAVE / HALF PAY LEAVE
(Please strike out whichever is not applicable)

1. Name of the Applicant :
2. Designation :
3. Nature of Leave : EL HPL COM.L E.O.L
If Com L, whether MC/FC is enclosed Yes/No
4. Period of leave applied for : **No. of Days of Leave:**
From

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 To

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DD MM YY DD MM YY
5. Sundays and holidays, if any proposed to be prefixed / suffixed to leave : **Prefix:**
From

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 To

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DD MM YY DD MM YY
- Suffix:**
From

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 To

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DD MM YY DD MM YY
6. Reason for leave applied : LTC LTC Block Year:

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 Others _____
7. Address and Contact No. during leave period : _____

Contact No : _____

Date:

Signature of the applicant

Recommendation of Section Head / Reporting Officer:

Signature with designation

(P.T.O)

FOR USE BY ESTABLISHMENT BRANCH (Balance of leave at Credit)

Leave at Credit - EL: day(s) HPL: Day(s)

Leave taken now - EL: day(s) HPL: day(s) Com.L: day(s)

Balance - EL: day(s) HPL: day(s)

Supdt / Asst Reg

Granted / Not Granted

Director