' APPLICATION FOR EARNED LEAVE or EXTENSION OF EL

1.	Name of the applicant	:		
2.	Post held	:		
3.	Department/ Office and Section	:,		
	~			
4.	Pay	:		
5.	House rent and other compensatory allowances drawn in the present post	· :		
6.	Nature and period of leave applied for and date from which required	:		
7.	Sundays and holidays, if any, proposed to be prefixed/ suffixed to leave	:		
8.	Grounds on which leave is applied for	1		
9.	Date of return from last leave, and the nature and period of that leave	:		
10.	I propose / do not propose to avail myself of leave travel concession for the block years during the ensuing leave.			
11.	Address during leave period	* :		
12	In the event of my recignation or valuable			
i) ii	which would not have been admissible had	rawn during commuted leave and that ad I sub-rule (1) of rule 30 not been applied;	missible during half pay leave,	
Date :		Signature of	Signature of the Applicant.	
13.	Officer remarks and recommendation of C	Controlling Officer		
Date :		Sign	Signature	
	Certifica	nte regarding admissibility of leave		
	. (By Audit	Officer in case of Gazetted Officer)		
14.	Certified that	leave	days from	
	to	is admissible under rule		
9	Services (Leave) Rules 1972.			
		Signature :		
Date	::	Designation :		

15. Orders of the authority competent to grant leave.