



Date:

Date:

APPLICATION FOR LEAVE - AIDED STAFF

Name

Designation

Department

Please grant me leave as follows :

APPLICATION FOR LEAVE - AIDED STAFF Please grant me leave as follows

Category	:	Casual / EarnedLeave UEL on MC/PA/On Duty	Category	:	Casual / Earned Lea UEL on MC/PA/On Duty	ave
No. of day required	:		No. of day required	:		
Period Purpose	:	PromTo	Period Purpose	:	FromTo	
No. of days already taken in this category			No. of days already taken in this category			
		Signature				Signature
Forwarded / Sanctioned			Forwarded / Sanctioned			

Name

Designation

Department

HOD PRINCIPAL SECRETARY HOD PRINCIPAL SECRETARY