APPLICATION FOR CHILD CARE LEAVE

1.	Name of the Applicant	:	_____
2.	Designation	:	_____
3.	Dept/Office/Section	:	_____
4.	Name of Child for whom Child Care leave is applied for	:	_____
5.	Date of Birth of the Child	:	_____
6.	Date on which child will be attaining 18 years.	:	_____
7.	Is the child among the two eldest Children	:	Yes/No
8.	EL in credit (as on date)	:	_____
9.	Period of Leave- Days	:	From_____To_____
	Prefix/Suffix of holidays, if any	:	_____
10.	Reason(s) for leave applied for	:	_____
11.	Total Child Care Leave availed till date	:	_____
12.	(a) Whether permission to leave station is required	:	Yes/No
	(b) If Yes, Address during leave period	:	_____ _____ _____
13.	Date of return from last leave, & nature and period of that leave	:	_____ _____

Date : _____

Signature of applicant
Pay Card No._____

Remarks of Controlling Officer

Leave Recommended / Leave Not Recommended.

Date :_____

Signature_____
Designation_____
Office_____