

**The Second Scheduled
(See Rule 3 (h)
FORM - 1
(see Rule (4))**

APPLICATION FOR LEAVE OR FOR EXTENSION OF LEAVE.

1. NAME OF APLICANT :.....
2. POST HELD :.....
3. DEPARTMENT/BRANCH/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:.....
9. Date of return from last leave, and the nature:.....
and period of that leave.
10. I proposed/do not propose to avail.....
myself of leave travel concession for the
block years
11. Address during leave period:.....

Signature of applicant
(With date)

12. Remarks and/or recommendation
of the Controlling Officer.

Signature (With date)
Designation.