



APPLICATION FORM 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

Remarks of Controlling Officer

Leave Recommended / Leave Not Recommended.

Date : _____

Signature _____

Designation _____