

## APPLICATION OF 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 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 \_\_\_\_\_