

Proforma for Leave Application

- 1) Employee Name _____
- 2) Designation _____
- 3) Department/Branch _____
- 4) Type of Leave applied for
(Whether E.L./Commuted/
Half Pay/ Maternity leave) _____
- 5) Period of Leave _____
- 6) Date since leave is requested _____
- 7) Whether station leave required _____
- 8) Prefixes/Suffixes _____
- 9) Address during leave _____
- 10) Details of last leave _____
- 11) Reasons for Leave _____

SIGNATURE OF EMPLOYEE

Recommendations of Branch In-charge/Head of Office _____

SIGNATURE OF COMPETENT AUTHORITY