**jk"Vªh; izkS|ksfxdh laLFkku jk;iqj**

**National Institute of Technology Raipur**

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**National Institute of Technology Raipur**

**Application Form for Earned Leave/Commuted Leave/HPL**

**(Teaching & Group-A Non-Teaching)**

|  |  |  |  |
| --- | --- | --- | --- |
| **1.** | Name:  | Designation:  | Deptt.:  |
| **2.** | Purpose of leave (attach proof in case of Special casual leave)(as specified in office order No. NITRR/Estt.Gaz/2014/1244  dtd 18/07/2014) | :  |
| **3.** | Previous Leave Details (EL/HPL/Commuted Leave/CL/RH/SCL) | : **From To** |
| **4.** | Period of Leave  | : **From To** |
| **5.** | Date of joining duty  | :  |
| **6.** | No. of days of leave (Sundays and Holidays, if any, propose to be prefixed/suffixed to Leave) | :  |
| **7.** | Charge hand over to  | :  |
| **8.** | Details of Class arrangement by faculty: |  |
| **S.No** | **Name & Designation of faculty** | **Date**  | **Signature** |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |
| 5. |  |  |  |
| **9.** | Whether Head Quarter Leave required (if required please mention dates) | : Yes No  |
| **10.** | Address and phone no. during absence | : |
|  |  |
|  ………………………………………………………………………………………….. Recommended /Non-Recommended**Signature of applicant (Head of the Department)** |
| Earned Leave Balance: \_\_\_\_\_ ; Half Pay Leave Balance: \_\_\_\_\_\_\_ ……………………………………. Verified by **Joint Registrar** |
| Date of application: Granted / not granted  **(Director)** |
| * **Please send this Leave Application to Establishment Section/Director/Registrar Office.**

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